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Feb 12 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 731006 (3)

1. Corporation Name

INTERNATIONAL ASSOCIATION FOR HYDROGEN ENERGY, I
NC.

Principal Place of Business

Mailing Address

4910 BILTMORE DR.
CORAL GABLES FL 33146

4910 BILTMORE DR.
CORAL GABLES FL 33146-1724

3. Date Incorporated or Qualified
10/30/1974

3a. Date of Last Report
03/19/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

4. FEI Number
51-0189699

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VEZIROGLU, BENGI
4910 BILTMORE DR.
CORAL GABLES FL 33146

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	ABDEL-AAL, H. K.	
STREET ADDRESS	COLLEGE OF PETROLEUM AND MINERALI	
CITY-ST-ZIP	DHAHRAN, SAUDI ARABIA	
TITLE	S	<input type="checkbox"/> DELETE
NAME	ESCHER, WILLIAM D	
STREET ADDRESS	5800 COTTAGE GROVE RD	
CITY-ST-ZIP	MADISON WI 53716	
TITLE	P	<input type="checkbox"/> DELETE
NAME	VEZIROGLU, T NEJAT	
STREET ADDRESS	4910 BILTMORE DR.	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	VEZIROGLU, BENGI	
STREET ADDRESS	4910 BILTMORE DR.	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MARCHETTI, CESARE	
STREET ADDRESS	INT'L INSTITUTE FOR APPLIED SYSTEMS ANAL.	
CITY-ST-ZIP	SCHOLOSS LAXENBURG AUSTRIA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MARTINEZ, ANIBAL R	
STREET ADDRESS	NATIONAL RESEARCH COUNCIL	
CITY-ST-ZIP	CARACAS VE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/97

x(305) 661-1709
Daytime Phone # 0030480

CR2E037 (9/96)

**International Association
for Hydrogen Energy**
P.O. Box 248294, Coral Gables, FL 33124, U.S.A.

OFFICERS AND BOARD MEMBERS

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