

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000095766

**Entity Name:** NACLH2O, INC.

**Current Principal Place of Business:**

3500 SW CORPORATE WAY, SUITE 202  
PALM CITY, FL 34990

**Current Mailing Address:**

3140 SE ST. LUCIE BLVD.  
STUART, FL 34997 US

**FEI Number:** 46-1424399

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HARTMAN, PETER  
3500 SW CORPORATE WAY, SUITE202  
PALM CITY, FL 34990 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

|                 |                             |                 |                               |
|-----------------|-----------------------------|-----------------|-------------------------------|
| Title           | VP D                        | Title           | P                             |
| Name            | HARTMAN, RALPH WIII         | Name            | HARTMAN, PETER                |
| Address         | 66-303 HALEIWA RD, UNIT 506 | Address         | 3500 CORPORATE WAY, SUITE 202 |
| City-State-Zip: | HALEIWA HI 96712            | City-State-Zip: | PALM CITY FL 34990            |

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PETER HARTMAN

**PRESIDENT**

**01/19/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date