## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F94000003057

Entity Name: HYDROQUAL, INC

FILED Apr 17, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1200 MACARTHUR BLVD MAHWAH, NJ 07430 **Current Mailing Address: New Mailing Address:** 1200 MACARTHUR BLVD MAHWAH, NJ 07430 FEI Number: 22-2299344 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition Name: LEO, WILLIAM M Name: 4 BEATRIX ROAD Address: Address: City-St-Zip: AIRMONT, NY 10901 City-St-Zip: **EVPD** Title: Title: () Delete () Change () Addition Name: MUTCH, ROBERT D Name: 360 DARLINGTON AVENUE Address: Address: RAMSEY, NJ 07446 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: (X) Change ( ) Addition ROBERT, SANTORE C ANDREW, THUMAN J Name: Name: 5848 MARLOW DRIVE 33 ALLEN STREET Address: Address: EAST SYRACUSE, NY 13057 City-St-Zip: RUMSON, NJ 07760 City-St-Zip: Title: **EVPD** ( ) Delete Title: () Change () Addition SCHEIBLE, O. K Name: Name: Address: 19 OAKLAND COURT Address: City-St-Zip: WARWICK, NY 10990 City-St-Zip: Title: Title: ( ) Delete () Change () Addition KOFFER, VIOLA J Name: Name: 106 MAPLE TERRACE Address: Address: City-St-Zip: PARK RIDGE, NJ 07656 City-St-Zip: Title: ( ) Delete Title: () Change () Addition FITZPATRICK, JAMES J Name: Name: Address: 46 BEAR MOUNTAIN RD Address: City-St-Zip: City-St-Zip: RINGWOOD, NJ 07456

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: VIOLA J. KOFFER O 04/17/2009