


2006 FOR PROFIT CORPORATION  
ANNUAL REPORT

FILED  
Jan 17, 2006 08:00 AM  
Secretary of State

DOCUMENT # J48288  
1. Entity Name  
HYDROPRO, INC.



Principal Place of Business 1346 S. KILLIAN DRIVE LAKE PARK, FL 33403 US	Mailing Address 1346 S. KILLIAN DRIVE LAKE PARK, FL 33403 US
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01042006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2749415	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
HENDERSHAW, WILLIAM K  
1201 SEAFARER CIRCLE  
101  
JUPITER, FL 33477-9067

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTS HENDERSHAW, WILLIAM K 1201 SEAFARER CIRCLE 101 JUPITER, FL 334779067
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CD HENDERSHAW, WILLIAM K 1201 SEAFARER CIRCLE 101 JUPITER, FL 334779067
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CRAWFORD, BRUCE 392-H GOLFVIEW RD. NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

UN0000388787  
01/19/06-80012-026 158.75

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William K. Hendershaw 1/13/06 561 848 6788  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #