2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000046905

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Entity Name: FUELNATION INC.

Title:

FILED Mar 02, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
999 STINSON WAY 301 WEST PALM BEACH, FL 33411 US	
Current Mailing Address:	New Mailing Address:
999 STINSON WAY 301 WEST PALM BEACH, FL 33411 US	
FEI Number: 65-0827283 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:
SALMONSON, CHRIS R 999 STINSON WAY 301 WEST PALM BEACH, FL 33411 US	
The above named entity submits this statement for th in the State of Florida.	e purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered A	Agent Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO DEFICEDS AND DIRECTORS

Title:

(X) Change () Addition

ALKHALIFA, ISA MOHAMMED ALKHALIFA, ISA MOHAMMED Name: Name: 999 STINSON WAY, SUITE 301 999 STINSON WAY Address: Address: City-St-Zip: WEST PALM BEACH, FL 33411 City-St-Zip: WEST PALM BEACH, FL 33411 Title: () Delete Title: (X) Change () Addition SCHLECHT, WILLIAM C SCHLECHT, WILLIAM C Name: Name: Address: Address: 999 STINSON 999 STINSON WAY, SUITE 301 WEST PALM BEACH, FL 33411 US WEST PALM BEACH, FL 33411 US City-St-Zip: City-St-Zip: Title: Title: CPD CPD () Delete (X) Change () Addition Name: CHRIS, SALMONSON Name: CHRIS, SALMONSON 999 STINSON WAY Address: 999 STINSON WAY, SUITE 301 Address: City-St-Zip: WEST PALM BEACH, FL 33411 City-St-Zip: WEST PALM BEACH, FL 33411

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRIS SALMONSON CPD 03/02/2007