2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000026923

Entity Name: HYDROGEN TECHNOLOGY APPLICATIONS, INC.

FILED May 01, 2007 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	HAVENUE NOR	ТН			
#116 CLEARWA	TER, FL 33762	US			
Current Mailing Address:			New Maili	New Mailing Address:	
	HAVENUE NOR	TH			
#116 CLEARWA	TER, FL 33762	US			
FEI Number:	59-3463606 I	FEI Number Applied For()	FEI Number Not Appl	licable () Certificate of Status Desired ()	
Name and	Address of Cur	rent Registered Agent:	Name and	Address of New Registered Agent:	
116	PETER HAVENUE NOR TER, FL 33762				
The above in the State		mits this statement for the p	urpose of changing it	its registered office or registered agent, or both,	
SIGNATUR					
	Electronic	Signature of Registered Age	nt	Date	
Election Cam		(b), F.S., the corporation did not ust Fund Contribution (). RS:	•	e. IS/CHANGES TO OFFICERS AND DIRECTORS:	
			Title:		
Title: Name: Address: City-St-Zip:	DP () De KLEIN, DENNIS J 66 PELICAN PLAC BELLEAIR, FL 337	E	Name: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DST () De DOMINICI, PETER 201 W DAVIS BLVI TAMPA, FL 33606		Title: Name: Address: City-St-Zip:	D (X) Change () Addition DOMINICI, PETER 201 W. DAVIS BLVD TAMPA, FL 33606	
Title: Name: Address: City-St-Zip:	DVP () De ASTRAB, JOHN 3000 ARBOR OAK TARPON SPRINGS	S DRIVE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition ASTRAB, JOHN 3000 ARBOR OAKS DRIVE TARPON SPRINGS, FL 34689	
Title: Name: Address: City-St-Zip:	DVP () De KLEIN, HAROLD A 1220 MADDON AV TOLEDO, OH 436	E # 7	Title: Name: Address: City-St-Zip:	DVP (X) Change () Addition KLEIN, HAROLD A 1015 HAWK STREET TOLEDO, OH 43612	
Title: Name: Address: City-St-Zip:	() De	lete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition MANNERS, MICHAEL M 4707 140TH AVE., N., SUITE 116 CLEARWATER, FL 33762	
Title: Name: Address: City-St-Zip:	() De	lete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition KLEIN, GREGORY 2011 ALLEN AVE., SUITE A2 CANTON SOUTH, OH 44707	

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: PETER DOMINICI D 05/01/2007