2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000084261

1. Entity Name

KLEEN FUEL CORPORATION OF AMERICA



Principal Place of Business

5151 NO. A1A #506 VERO BEACH, FL 32963 Mailing Address

DO NOT WRITE IN THIS SPACE /

5151 NO. A1A #506 VERO BEACH, FL 32963

FILED Apr 02, 2008 8:00 am Secretary of State

04-02-2008 90025 036 ***158.75



03272008

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0829757 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6.	Name	and Address	of	Current	Registe	red A	lgent

MARTORANA, JOSEPH 5151 NORTH A1A, #506 VERO BEACH, FL 32963

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
algebras, types or printed name or regulated again and an appropriate. Proof. I regulated regulated required monitorisationly.											
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.									
10.	OFFICERS AND DIREC	TORS									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MARTORANA, JOSEPH 5151 N A1A, #506 VERO BEACH, FL 32963										
TITLE NAME STREET ADDRESS CITY-ST-ZIP											
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE						
TITLE NAME STREET ADDRESS CETY-ST-ZIP				IN ⁻	THIS SPACE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP											
TITLE NAME STREET ADDRESS CITY-ST-ZIP			•								
13. Library contifue that the information supplied with this filling does not qualify for the exemptions contained in Chanter 119. Florida Statutes. Lighther certify that the information											

12. I hereby certify that the information supplied with this filling 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

SIGNATURE IND VIPED OR PRINTED ROME OF SIGNING OFFICER OR DIRECTOR

4-1-08 (772)-231-239