2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000101448

FILED Jan 21, 2008 Secretary of State

Entity Name: HOERBIGER COMPRESSION TECHNOLOGY AMERICA HOLDING, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	EWAY DR O BEACH, FL 33	069			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	EWAY DR O BEACH, FL 33	069			
FEI Number	: 52-1281401	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Cu	rrent Registered Agent:	Name and Address	of New Registered Agent:	
1201 HAY	ATION SERVICE S STREET SSEE, FL 32301				
	e named entity sul e of Florida.	bmits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
in the Stat					
in the Stat SIGNATU	RE:				
		Signature of Registered Ago	ent	Date	
SIGNATU	Electronic	Signature of Registered Agriders of Registered Agriders of Registered Agriders (1).	ent	Date	
SIGNATU	Electronic	rust Fund Contribution ().		Date GES TO OFFICERS AND DIRECTORS	
SIGNATU Election Ca OFFICER Title: Name: Address: City-St-Zip:	Electronic mpaign Financing T S AND DIRECTO D ()D KOMISCHKE, MAI 3350 GATEWAY I POMPANO BEACI	rust Fund Contribution (). DRS: elete RTIN DR H, FL 33069	ADDITIONS/CHANG Title: Name: Address: City-St-Zip:	GES TO OFFICERS AND DIRECTORS () Change () Addition	
SIGNATU	Electronic mpaign Financing T S AND DIRECTO D ()D KOMISCHKE, MAI 3350 GATEWAY I	Prust Fund Contribution (). DRS: elete RTIN DR H, FL 33069 elete S DR	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTORS	
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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 LAUBE T 01/21/2008