

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR NIFORM LIMITED OFFERING EXEMPTI

	OMB APPROVAL						
į	OMB Number: 3235-007						
	Expires:						
	Estimated average burden						
	hours per response	16.00					

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					

UNIFORM LIMITED OFFERING EXEMI	PTION
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Series B Preferred Stock Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) H2scan Corporation	05061385
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Couc)
25133 Anza Drive, Unit B, Valencia, CA 91355 Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) same as above	661-775-9575 Telephone Number (Including Area Code)
Brief Description of Business	
hydrogen sensor systems	PROCECCE
Type of Business Organization organization limited partnership, already formed business trust limited partnership, to be formed other (p	lease specify): AUG 09 2005
Actual or Estimated Date of Incorporation or Organization: O 7 O 4 Actual Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	* ** ** ** ** ** ** ** ** ** ** ** ** *
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D o 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supplied be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sa ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law. this notice and must be completed.	ecurities Administrator in each state where sales the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal ex appropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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Enter the information reEach promoter of	equested for the fo		ame-	nochanges)		<u> </u>	•••	
 Each beneficial ow 	ner having the pow	ver to vote or dispose,	or direct t	he vote or disposition	of, 10	% or more c	f a clas	s of equity securities of the issue
		of corporate issuers an of partnership issuers.	-	orate general and ma	naging	partners of	f partne	ership issuers; and
Check Box(es) that Apply:	Promoter	Beneficial Ow	ner _	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)		-			<u></u>		
Business or Residence Addre	ess (Number and	Street, City, State, Zi	ip Code)					
Check Box(es) that Apply:	Promoter	Beneficial Ow	ner _	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)						- 1	
Business or Residence Addre	ess (Number and	Street, City, State, Zi	ip Code)				-, <u>-</u>	
Check Box(es) that Apply:	Promoter	Beneficial Ow	ner	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)			-				
Business or Residence Addre	ess (Number and	Street, City, State, Zi	p Code)					, p. (4)
Check Box(es) that Apply:	Promoter	Beneficial Ow	ner _	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)							
Business or Residence Addre	ess (Number and	Street, City, State, Zi	ip Code)					
Check Box(es) that Apply:	Promoter	Beneficial Ow	ner _	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)			,		_		
Business or Residence Addre	ess (Number and	Street, City, State, Zi	ip Code)		<u> </u>	*		
Check Box(es) that Apply:	Promoter	Beneficial Ow	ner _	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)							
Business or Residence Addre	ess (Number and	Street, City, State, Z	p Code)					
Check Box(es) that Apply:	Promoter	Beneficial Ow	ner _	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if individual)							
Business or Residence Addre	ess (Number and	Street, City, State, Z	ip Code)					
	(Use bla	ank sheet, or copy and	use addi	tional copies of this	sheet.	as necessary	/)	

					В. 1	NFORMAT	ION ABOU	T OFFERI	NG	Y	T		
1		o cha			d to	11			41.: 66	· O		Yes	No
1.	mas the	issuer soic	d, of does th			11, to non-a Appendix				-	•		
2.	What is	the minim	um investm			• •		-				s	
	W 1141 15		THE THE COURT	ient that w	111 00 docc	pica irom i	ing marvia				•••••••••	Yes	No
3.	Does th	e offering	permit joint	ownershi	p of a sing	le unit?					•••••		
4.	commis If a pers or states	sion or sim on to be lis s, list the na	tion request ilar remunested is an ass ame of the b you may so	ration for s lociated pe roker or de	olicitation rson or age aler. If me	of purchasent of a brokers ore than five	ers in conne ter or deale e (5) persor	ection with r registered ns to be list	sales of sec d with the S ed are asso	curities in t EC and/or	he offering. with a state		
Ful	l Name (Last name	first, if indi	vidual)									
Bus	siness or	Residence	Address (N	umber and	I Street, C	ity, State, Z	Lip Code)						
Nai	me of Ass	sociated Br	roker or Dea	aler	<u>.</u>								
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)			•••••		•••••		☐ Al	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if indi	vidual)									
Bus	siness or	Residence	Address (N	Number an	d Street, C	City, State,	Zip Code)			<u>.</u>		<u> </u>	
Nai	me of Ass	sociated Bi	roker or De	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)							☐ Al	1 States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if indi	vidual)									
Bus	siness or	Residence	Address (N	Number an	d Street, C	City, State,	Zip Code)						
Nai	me of Ass	sociated Br	roker or Dea	aler									
Sta	tes in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)							☐ AI	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		
	Common 📝 Preferred	Ψ	
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		
	Other (Specify)		
	Total	 1,500,000.00	° 1,115,203.25
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		A
		Number Investors	Aggregate Dollar Amount of Purchases \$ 1,115,203.25
	Accredited Investors		\$ 1,113,203.23 \$ 0.00
	Non-accredited Investors		
	Total (for filings under Rule 504 only)	28	\$ 1,115,203.25
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	· · · · · · · · · · · · · · · · · · ·	
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] \$
	Printing and Engraving Costs] \$
	Legal Fees		15,000.00
	Accounting Fees	<u>2</u>	\$ 2,500.00
	Engineering Fees] \$
	Sales Commissions (specify finders' fees separately)		-]
	Other Expenses (identify)] \$
	Total		\$_17,500.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Questi and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted approceeds to the issuer."	ross	s 1,482,500°
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used each of the purposes shown. If the amount for any purpose is not known, furnish an estimate check the box to the left of the estimate. The total of the payments listed must equal the adjusted g proceeds to the issuer set forth in response to Part C — Question 4.b above.	and	·
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		
	Purchase of real estate	🔲 \$	\$
	Purchase, rental or leasing and installation of machinery		
	and equipment		_
	Construction or leasing of plant buildings and facilities	🗌 \$	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	¬ \$	□\$
	Repayment of indebtedness		
	Working capital		MS 1 442 500
	Other (specify):	U \$	() 1 () 2 () 2 () 2 () 2 ()
			- U "
		 	\$
	Column Totals	s <u>· Ø</u>	□\$ <u>1,482,5</u> 0
	Total Payments Listed (column totals added)		
	D. FEDERAL SIGNATURE		
	issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Cor	nmission, upon writte	
ihe Issi	information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) Ier (Print or Type) Signature Title of Signer (Print or Type) Title of Signer (Print or Type)	Date	1,2005

- ATTENTION ----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)