

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000075821

**FILED**  
**Apr 30, 2008**  
**Secretary of State**

**Entity Name:** HELICON FOUNDATION REPAIR SYSTEMS, INC.

**Current Principal Place of Business:**

13650 N. 12TH ST., STE. C  
TAMPA, FL 33613

**New Principal Place of Business:**

13650 N. 12TH ST  
SUITE C  
TAMPA, FL 33613

**Current Mailing Address:**

P.O. BOX 280031  
TAMPA, FL 33682

**New Mailing Address:**

FEI Number: 20-2665416

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SILVER, JAY  
13650 N. 12TH ST., STE. C  
TAMPA, FL 33613 US

**Name and Address of New Registered Agent:**

SILVER, JAY D  
13650 N. 12TH ST.  
SUITE C  
TAMPA, FL 33613 US

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.

SIGNATURE: JAY D. SILVER

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SILVER, JAY  
Address: 13650 N. 12TH ST., STE. C  
City-St-Zip: TAMPA, FL 33613

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: SILVER, JAY D  
Address: 13650 N. 12TH ST., STE. C  
City-St-Zip: TAMPA, FL 33613

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: JAY D. SILVER

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date