

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000075821

**FILED**  
**Mar 29, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

17217 TIFFANY SHORE DR  
LUTZ, FL 33549

**New Principal Place of Business:**

**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 D  
17217 TIFFANY SHORE DR  
LUTZ, FL 33682 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SILVER, JAY D  
Address: P.O. BOX 280031  
City-St-Zip: TAMPA, FL 33682

I hereby 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 all other like empowered.

SIGNATURE: JAY SILVER

PD

03/29/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date