

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000059002

**Entity Name:** HELIX GROUP INC

**Current Principal Place of Business:**

6095 SW 20 STREET  
MIAMI, FL 33155

**Current Mailing Address:**

6095 SW 20 STREET  
MIAMI, FL 33155

**FEI Number:** 20-1071498

**Certificate of Status Desired:** No

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

CASTELLON, MONICA  
6095 SW 20 STREET  
MIAMI, FL 33155 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD	Title	VD
Name	CASTELLON, MONICA	Name	CASTELLON, LUCIANO
Address	6095 SW 20 STREET	Address	6095 SW 20 STREET
City-State-Zip:	MIAMI FL 33155	City-State-Zip:	MIAMI FL 33155

*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: MONICA CASTELLON**

**PRESIDENT**

**02/01/2024**

Electronic Signature of Signing Officer/Director Detail

Date