

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004205

Entity Name: HELICONIA 2K, INC.

FILED  
Feb 08, 2011  
Secretary of State

## Current Principal Place of Business:

C/O MICHAEL J BODAH CPA 2443 PINE WOOD CR  
NAPLES, FL 34105

## New Principal Place of Business:

## Current Mailing Address:

C/O MICHAEL J BODAH CPA 2443 PINE WOOD CR  
NAPLES, FL 34105

## New Mailing Address:

FEI Number: 80-0033074

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BODAH, MICHAEL CPA  
2443 PINWOOD CIRCLE,  
NAPLES, FL 34105 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

## OFFICERS AND DIRECTORS:

Title: CP  
Name: KIMBERLY WILLIAM DURLING  
Address: 2 LAPWING CLOSE, SELSDON VALE  
City-St-Zip: S. CROYDEN, SURREY, EN CR2 UK

Title: DR  
Name: CORLISS, JAMES  
Address: 104-210 TIMBER LAKE CIRCLE  
City-St-Zip: NAPLES, FL 34104 US

Title: DR  
Name: DURLING, COLLEEN  
Address: 2 LAPWING CLOSE, SELSDON VALE  
City-St-Zip: S. CROYDEN, SURREY, EN CR2 8TD UK

Title: TRES  
Name: DURLING, MANUELA  
Address: 955 MARINE DRIVE, APT 1601  
City-St-Zip: WEST VANCOUVER, BC V7T 1A9 CA

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: MANUELA DURLING

TRES

02/08/2011

Electronic Signature of Signing Officer or Director

Date