## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANN	UAL REPORT 1997	Secretar	y of State	Secretar	y of State	
1. Corporate	MENT # K1701 HELLE, INC.	7 (0)				
					HIN 910K 148K 148K 148K 148K 148K	
P. O. BOX 2430 P. O.		Mailing Address P. O. BOX 2430 FORT MYERS BEACH FL 33	9832-2430 January			
•				3. Date Incorporated or Qualified 03/04/1988	3a, Date of Last Report 07/24/1996	
2. Principal F				4. FEI Number 65-0041594	Applied For Not Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Sta 23	le	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25		Country 30		Yes No	
p	9. Name and Address of Cu	rrent Registered Agent	81 Name	10, Name and Address of New Reg	gistered Agent	
	RS, RICHARD		81 Name			
			82 Street Add	ress (P.O. Box Number is Not Acceptab	le)	
FT. MYERS, 33907			83			
i				·		
			B4 City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Statute	es, the above-named corp	poration submits this statement for the p	urpose of changing its registered	
office or agent Ta	registered agent, or both, in the S am familiar with, and accept the ol	tate of Florida. Such change was a bligations of, Section 607,0505, Flo	iutnorized by the corpora prida Statutes.	poration submits this statement for the p tion's board of directors. I hereby accep	n the appointment as registered	
SIGNATURE		The second secon				
12.	Signer and ground princed notice of registered agent and title of applicable (NOTE: Rec OFFICERS AND DIRECTORS			ogistered Agent signature required when reinstating)  DATE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TELF	D	DELETE	1.1 TITLE	7,557,10,10,10,10,10,10,10,10,10,10,10,10,10,	Change Addition	
NAME	ROSEN, PAUL A.		1.2 NAME		,	
STREET ADDRESS			1.3 STREET ADDRESS		ĺ	
01Y \$1-7F	FT. MYERS BEACH FL		1.4 CITY - ST - 2IP			
ากษ		L_] DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CHY-ST-7IP THILE		☐ DELETE	2. 4 City-St-ZiP 3.1 Title		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			
CITY - ST - 201			3.4. CiTY+ST-ZiP			
Mile		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDMESS			4.3 STREET ADDRESS			
CITY-ST-ZH:	· · · · · · · · · · · · · · · · · · ·	DELETE	4.4 CiTY-ST-ZiP 5.1 TITLE		Change Addition	
NAME			5.2 NAME		C outuinde C Vordition	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-S1-71P			5.4 CITY - ST - ZIP		}	
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME		ł	
STREET ADDRESS	Į		6.3 STREET ADDRESS		)	
0017 - ST - 2011			6.4 CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 of changed, or only attachment with an address.

**SIGNATURE:** 

**FILED** 

Apr 03 1997 8:00am

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