## FILE NOW: FILING FEE AFTER MAY 18T IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K97803

(6)

THE HELM GROUP, INC.

**FILED** 

Apr 07 1998 8:00am

Secretary of State

Principal Place of Business	Mailing Address	
4071 SCARLET IRIS PLACE WINTER PARK FL 32792 US	4071 SCARLET IRIS PL WINTER PARK FL 32792 US	DO

WINTER PARK FL 32792 WINTER PARK FL 32792 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified						
<b>.</b>			<u></u>			<u> </u>	06/21/1989		
2. Principal Place of Business 2a. Mailing Address				4.	FEI Number	L	Applied For		
1]	26			1	59-2960438		Not Applicable		
Suite, Apt. #, e	etc.	Suite, Apt. #, etc.		5.	Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State			6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Zip Country		/	8. This corporation owes or has paid the current year Intangible			
4]	25	29	30				Personal Property Tax due June 30.	] Yes	☐ No
g, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
HELM, MELANIE 4071 SCARLET IRIS PLACE WINTER PARK FL 32792		81	Name						
		82	Street Address (P.O. Box Number is Not Acceptable)						
				83					
				84	City		FL	85	Zip Code
office or regi	the provisions of Sections 607.6 istered agent, or both, in the St familiar with, and accept the ob	tate of Florida. Such chang	ge was authorize	d by	y the corporation	oration on's b	n submits this statement for the purpose of poard of directors. I hereby accept the appropriate the pro-	chang ointmer	ing its registered nt as registered

			_i	<b>F&amp;</b>			
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Soction 607.0505, Florida Statutes.							
SIGNATURE							
	Signature, typed or printed name of registered agent and little if applicable	le. (NOTE: A		required when reinstating) DATE:			
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	•	☐ DELETE	1.1 TITLE	Change Addition			
NAME	HELM, MELANIE		1.2 NAME				
STREET ADDRESS	4071 SCARLET IRIS PL		1.3 STREET ADDRESS				
CITY-ST-ZIP	WINTER PARK FL		1.4 CITY-ST-ZIP				
TITLE	<b>T</b>	☐ DELETE	2.1 TITLE	Change Addition			
NAME	HELM, MICHAEL		22 NAME				
STREET ADDRESS	40,71 SCARLET IRIS PL		2.3 STREET ADDRESS				
CITY-ST-ZIP	WINTER PARK FL		2. 4 CITY - ST - ZIP				
TITLE		DELETE	3.1 TITLE	☐ Change ☐ Addition			
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4 CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE	Change Addition			
NAME			4 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP	_			
TITLE	<del>-</del> · · · · · ·	☐ DELETE	5.1 TITLE	Change Addition			
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 C(TY-ST-ZIP				
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addition			
NAME			6.2 NAME				
STREET ADDRESS		·	6.3 STREET ADDRESS				
OUTV OT TID	i de la companya de		CACITY OF 710				

14. Thereby 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 if changed, or on an attachment with an address. 407

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