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Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L34954

HELM BANK

Principal Place of Business

FILED	
Feb 19, 1999 8:00an	1
Secretary of State	

02-19-1999 90018 002 ***150.00

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f310 Alami FL 331	.L. AVE. 31	1200 BRICKELL AVE. #310 Miami Fl. 33131			, DO NOT WR	ITE IN T	HIS SPACE	
					Date Incorporated or Qualified			-
Princinal I	Place of Business	0- 14-2- 141			12/08/1989			
	riace of Busiliess	2a. Mailing Address			4. FEI Number			Applied For
<u> </u>	. #, etc.	26			<u>65-0159184</u>			Not Applicable
J Suite, Apt		Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75	Additional
City & Sta	to.	27			3. Certificate of Status Desired			Required
Ony & Sta	ne .	City & State			6. Election Campaign Financing			May Be
7in		28	 		Trust Fund Contribution			to Fees
Zip ⊓	Country	Zip		intry	8. This corporation owes the curr	rent vear		
·l	25	29	30	_	Personal Property Tax.	,	☐ Yes	□No
	9. Name and Address of Current I	Registered Agent			10. Name and Address of New F	Registere	ed Agent	
NO	DECLINED DIRECTANT TO FLOR	DA OTATIONEO		81 Name				
CUA	R REQUIRED PURSUANT TO FLOR	DA STATUTES		82 Street Ad	M (D.O. D.)			
	NPTER 607.034 (2)			Street Ad	dress (P.O. Box Number is Not Accepta	able)		
. FL				83	744		 -	
					·			
				84 City			. 85 Zip	Code
1, Pursuant	to the provisions of Sections 607 0502 a	and 607 1509. Elocida Stat				F		
office or r	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was ns of. Section 607 0505. F	authorized	оve-патеа со by the corpora	rporation submits this statement for the ition's board of directors. I hereby accep	purpose of the app	of changing it pointment as n	s registered egistered
agent, i a			ionda Stati	ites.				
GNATURE	•		ionda otati	1103.				
GNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NO	TE: Registered	1103.	ired when reinstating)	DATE		
GNATURE	Signature, typed or printed name of registered agent an OFFICERS AND I	d title if applicable. (NO	TE: Registered	Agent signature requi		_		ORS IN 12
IGNATURE 2. LE	Signature, typed or printed name of registered agent an OFFICERS AND I	d title if applicable. (NO	TE: Registered 13.	Agent signature requi	ired when reinstating)	_	AND DIRECTO	
IGNATURE 2. LE	Signature, typed or printed name of registered agent an OFFICERS AND ID FENTON, JAMES P.	d title if applicable. (NO	TE: Registered	Agent signature requi	ired when reinstating)	_		
IGNATURE 1. LE ME REET ADDRESS	OFFICERS AND ID D FENTON, JAMES P. 1983 NW 88 COURT, SUITE 301	d title if applicable. (NO	TE: Registered 13. 1.1 TITI 1.2 NAI	Agent signature requi	ired when reinstating)	_		
IGNATURE 2. LE ME REET ADDRESS Y-ST-ZIP	OFFICERS AND DESCRIPTION OFFICERS AND DESCRIPTION OFFICERS AND DESCRIPTION OFFICERS AND DESCRIPTION OF THE DESCRIPTION OF T	d little if applicable. (NO DIRECTORS DELETE	13. 1.1 TIT 1.2 NAI 1.3 STF	Agent signature requi	ired when reinstating)	_		
IGNATURE 2. LE ME REET ADDRESS Y-ST-ZIP LE	OFFICERS AND ID D FENTON, JAMES P. 1983 NW 88 COURT, SUITE 301 MIAMI FL	d title if applicable. (NO	13. 1.1 TIT 1.2 NAI 1.3 STF	Agent signature requi LE ME REET ADDRESS Y-ST-ZIP	ired when reinstating)	_		☐ Additio
IGNATURE 2. LE ME REET ADDRESS Y-ST-ZIP LE ME	OFFICERS AND (DFINE) DFENTON, JAMES P. 1983 NW 88 COURT, SUITE 301 MIAMI FL D GOLDBERG, MICHAEL	d little if applicable. (NO DIRECTORS DELETE	TE: Registered 13. 1.1 TIT 1.2 NAI 1.3 STF	Agent signature requi	ired when reinstating)	_	☐ Change	☐ Additio
IGNATURE 2. LE ME REET ADDRESS Y-ST-ZIP LE	OFFICERS AND ID D FENTON, JAMES P. 1983 NW 88 COURT, SUITE 301 MIAMI FL D GOLDBERG, MICHAEL 16855 NE 2ND AVE SUITE 303	d little if applicable. (NO DIRECTORS DELETE	13. 1.1 TIT 1.2 NAI 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAI	Agent signature requi	ired when reinstating)	_	☐ Change	☐ Addition
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the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an attachment with an enderge, with all other like empowered. officer or director of the corporation Block 12 or Block 13 if changed, of

IGNATURE: