2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000084009

Entity Name: HELLENIC ASPIS & ASSOCIATES INC.

FILED Mar 15, 2005 Secretary of State

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Current Principal Place of Business:			New Princ	New Principal Place of Business:	
	AD STREET ILLE, FL 3460	01			
Current Mailing Address:			New Maili	ng Address:	
	AD STREET ILLE, FL 3460	01			
FEI Number:	30-0090577	FEI Number Applied For()	El Number Not Appl	icable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
20 S BROA	3 OFFSHORE AD STREET ILLE, FL 3460	BUSINESS FORMATION, INC 11 US			
The above in the State		submits this statement for the purp	oose of changing it	ts registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Agent		Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	KIKAREAS, PAI	ILLOWWICK CR	Title: Name: Address: City-St-Zip:	P/CE (X) Change () Addition KIKAREAS, PANAGIOTIS 20 S. BROAD STREET BROOKSVILLE, FL 34601	
Title: Name: Address: City-St-Zip:	VP/S () POLEMI, EVAN 17308 85 SE W LADY LAKE, FL	ILLOWICK CR	Title: Name: Address: City-St-Zip:	VP/S (X) Change () Addition POLEMI, EVANGELIA 20 S. BROAD STREET BROOKSVILLE, FL 34601	
Title: Name: Address: City-St-Zip:	D () POLEMI, EVAN 17308 85 SE W LADY LAKE, FL	ILLOWICK CR	Title: Name: Address: City-St-Zip:	D (X) Change () Addition POLEMI, EVANGELIA 20 S. BROAD STREET BROOKSVILLE, FL 34601	
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Title: Name: Address: City-St-Zip:	VP/D () KIKAREAS, LEG 13 CHRYSSOL ATHENS, GR 1	ORA STR.	Title: Name: Address: City-St-Zip:	VP/D (X) Change () Addition KIKAREAS, LEONIDAS 20 S. BROAD STREET BROOKSVILLE, FL 34601	
Title: Name: Address: City-St-Zip:	D/S () POLEMI, SMAR 13 CHRYSSOL ATHENS, GR 1	ORA STR.	Title: Name: Address: City-St-Zip:	D/S (X) Change () Addition POLEMI, SMARAGDA 20 S. BROAD STREET BROOKSVILLE, FL 34601	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EVANGELIA POLEMI D 03/15/2005