

2007 FOR PROFIT CORPORATION ANNUAL REPORT


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Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90125 018 ***150.00

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DOCUMENT # P01000113520					
1. Entity Name HELENA'S CHOCOLATES USA, INC DBA HELENA'S CHOCOLATE US					
Principal Place of Business 4611 NW 97TH COURT MIAMI, FL 33178		Mailing Address 4632 NW 107 AVE 2009 MIAMI, FL 33178			
2. Principal Place of Business - No P.O. Box # 8050 NW 8 th Street		3. Mailing Address 8050 NW 8 th Street			
Suite, Apt. #, etc Suite 201		Suite, Apt. #, etc Suite #201			
City & State MIAMI, FL		City & State MIAMI, FL			
Zip 33126	Country U.S.A.	Zip 33126	Country U.S.A.	4. FEI Number 65-1154578	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PANIZO, FERNANDO L 4632 NW 107 #2009 MIAMI, FL 33178			7. Name and Address of New Registered Agent Name: FERNANDO L. PANIZO Street Address (P.O. Box Number is Not Acceptable) 8050 NW 8 th Street #201 City: MIAMI FL Zip Code: 33126		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <u>JFS</u> FERNANDO L. PANIZO 01-31-07 <small>Signature of officer or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE PANIZO, ELENA S 1195 WEST ANGAMOS AVENUE #304 MIRAFLORES, LIMA PERU ZP 18, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERNANDO L. PANIZO 8050 NW 8 th Street MIAMI, FL 33126	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICER ELENA SOLER DE PANIZO OF 1195 W. ANGAMOS AVE #304 MIRAFLORES, LIMA, PERU ZP 18	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information furnished on this report is true and accurate and that I, the undersigned, am the duly authorized 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered					
SIGNATURE: <u>JFS</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			01-31-07 <small>Date Day/mo/Year</small>		