

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

<b>DOCUMENT # P02000078630</b> 1. Entity Name <b>HELP BAIL BONDS, INC.</b>						<b>FILED</b> 05 SEP -1 2005 SECRET TALLAHASSEE	
Principal Place of Business <b>4707 140TH AVENUE NORTH SUITE 113 CLEARWATER FL 33762</b>				Mailing Address <b>4707 140TH AVENUE NORTH SUITE 113 CLEARWATER FL 33762</b>			
2. Principal Place of Business  Suite, Apt. #, etc.				3. Mailing Address  Suite, Apt. #, etc.			
City & State				City & State			
Zip		Country		Zip		Country	
4. FEI Number <b>51-0416203</b>				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent  <b>SPIEGEL &amp; UTRERA, P.A. 1840 SW 22 ST 4 FLR MIAMI FL 33145</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code			
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____							
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP DPST LOWMAN, DAVID L 6213 12TH AVE. SOUTH GULF PORT FL 33707 <input type="checkbox"/> Delete				TITLE NAME STREET ADDRESS CITY-ST-ZIP 800059387278 09/07/05--01026--008 **150.00 <input 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			
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 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
SIGNATURE: <i>David L. Lowman</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				08-10-05 (727) 535-2999 Date Daytime Phone #			

# Spiegel & Utrera, P.A.

Counselors & Attorneys at Law

KEVORK ADANAS<sup>3</sup>  
RAY GARCIA<sup>4</sup>  
SEBASTIAN Y. GHEITH<sup>11</sup>  
DAN HANCUFF<sup>7</sup>  
JON M. HARDY<sup>7</sup>  
TIMOTHY J. HEALY<sup>7</sup>  
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JAMES W. OVE, JR.<sup>1</sup>  
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RUSSELL D. WILLIAMS<sup>3</sup>

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Please reply to  
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Miami, FL 33245-0605

## SENIOR PARALEGALS

GRACIELA BATTAGLIA  
IRMA C. MARQUEZ

CLAUDIA MERINO

August 30, 2005

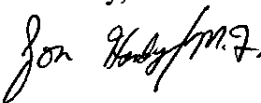
State of Florida Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Waiver of Annual Report late fee for HELP BAIL BONDS, INC., a Florida Corporation;  
Document Number P02000078630.**

Dear Sir or Madam:

Please be advised that Spiegel & Utrera, P.A., (hereinafter the "Firm") is general counsel for the above-captioned company (hereinafter the "Company"). The Company failed to file its Uniform Business Report or pay the Uniform Business Report filing fee within the time prescribed by Florida Statutes Chapter 607 because the written notice and requirements for filing the Annual Report and pay the Annual Report fee to the Florida Department of State was never received by the Company. Therefore, please allow this correspondence to serve as a request that the Florida Department of State Division of Corporations waive the late fee for the Company upon the filing by the Company of its Uniform Business Report and payment of the filing fee for same, which are presented contemporaneously with this request.

Sincerely,



Jon M. Hardy  
For the Firm

## Enclosures:

1. UBR
2. Filing fee

<sup>1</sup> Licensed in Florida  
<sup>3</sup> Licensed in California  
<sup>11</sup> Licensed in New York  
<sup>10</sup> Licensed in New Jersey  
<sup>7</sup> Licensed in Illinois, Iowa & Florida  
<sup>11</sup> Licensed in Nevada & California  
<sup>12</sup> Licensed in New York & New Jersey  
<sup>5</sup> Licensed in New York, New Jersey & D.C.  
<sup>6</sup> Licensed in Illinois & Reg. U.S. Patent Office  
<sup>4</sup> Licensed in Florida and Florida Civil Law Notary  
<sup>3</sup> Licensed in New York, Florida & Qualified Solicitor  
in England and Wales  
<sup>1</sup> Licensed in Florida and Registered as a Foreign  
Lawyer in England and Wales  
<sup>3</sup> Licensed in Florida & Qualified Solicitor  
in England and Wales