


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000030366 1. Entity Name HELEN & NEAL INC.	
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Principal Place of Business P.O BOX 5535 KEY WEST, FL 33045	Mailing Address P.O BOX 5535 KEY WEST, FL 33045
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MARTIN, NEAL R
2004 PATTERSON AVENUE
KEY WEST, FL 33040**

**DO NOT WRITE
IN THIS SPACE**

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 Neal Martin DATE 4-27-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retreating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MR. MARTIN, NEAL R 2004 PATTERSON AVENUE KEY WEST, FL 33040
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MS. FILL, HELEN K 2004 PATTERSON AVENUE KEY WEST, FL 33040
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Neal Martin Neal Martin DATE 4-27-06 DAYTIME PHONE # 305-296-8269
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR