


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2005 8:00 am**  
**Secretary of State**

04-11-2005 90166 026 \*\*\*150.00

<b>DOCUMENT # P04000036139</b> 1. Entity Name <b>HELI BROKER INC.</b>					
Principal Place of Business <b>12515 N KENDALL DRIVE #314</b> <b>MIAMI, FL 33186</b>		Mailing Address <b>12515 N KENDALL DRIVE #314</b> <b>MIAMI, FL 33186</b>			
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State  Zip		City & State  Zip		Country	
City & State  Zip		City & State  Zip		Country	
6. Name and Address of Current Registered Agent  <b>HALLER, KENNETH M</b> <b>12515 N KENDALL DRIVE #314</b> <b>MIAMI, FL 33186</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				4. FEE Number <b>65-0946109</b>	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
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				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 information covered.	
SIGNATURE: <i>Kenneth M. Haller</i>				SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <b>KENNETH M. HALLER</b>	
DATE: <b>4/7/05</b>				Daytime Phone #	