2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 11, 2005 8:00 am Secretary of State DOCUMENT # P04000036139 04-11-2005 90166 026 ***150.00 1. Entity Name HELI BROKER INC. Principal Place of Business Mailing Address 12515 N KENDALL DRIVE #314 12515 N KENDALL DRIVE #314 MIAMI, FL 33186 MIAMI, FL 33186 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01052005 CR2E034 (10/03) City & State Clty & State 63-0946109 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HALLER, KENNETH M Street Address (P.O. Box Number is Not Acceptable) 12515 N KENDALL DRIVE #314 MIAMI, FL 33186 Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Detete TITLE Change Addition BARRINGTON, DIANE H NAME NAME STREET ADDRESS 4162 KINGSTON WAY CATTLE EGRET STREET ADDRESS COV+ST-7IP GITY-ST-ZIP BRADENTON FLORIDA TITLE ☐ Dalete TITLE DIRECTOR NAME NAME KENNETI STREET ADDRESS STREET ADDRESS 12515 CITY-ST-ZIP FLORIDA City, ST. 7P TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COY+ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete Addition Change NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-7IP TOLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP CITY-ST-ZIP 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 accurage and that my signature shall have the same legal effect as it made under oath; that i am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 it as it may be supported. indicated on this report or s of the corporation or the re-changed, or on an attach or

FILED