2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with

SIGNATURE:

an address, with all other like empowered.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 06, 2005 8:00 am Secretary of State DOCUMENT # P04000114635 1. Entity Name 05-06-2005 90097 030 ***158.75 HELMES INTERIORS, INC. Principal Place of Business Mailing Address 5708 42ND STREET EAST BRADENTON FL 34203 5708 42ND STREET EAST **BRADENTON FL 34203** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 20-146 Not Applicable Zip Country 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 HELMES, RICHARD D Street Address (P.O. Box Number is Not Acceptable) 5703 42ND STREET EAST **BRADENTON FL 34203** Zip Code 34203 Bradenton 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) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11 HILE Delete TITLE ☐ Addition HELMES, RICHARD D NAME NAME STREET ADDRESS 5708 42ND STREET EAST STREET ADDRESS **BRADENTON FL 34203** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ШЕ Addition ☐ Change NAME HELMES, RICHARD D NAME STREET ADDRESS 5708 42ND STREET EAST STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34203** CITY-ST-ZIP TITLE Delete TITLE Addition Change NAME HELMES, RICHARD D NAME STREET ADDRESS 5708 42ND STREET EAST STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34203** CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Detete TITLE ☐ Addition ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIFLE ☐ Defete ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

FILED