

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000064571

FILED
Aug 15, 2009
Secretary of State

Entity Name: HELARCOUS, INC.

Current Principal Place of Business:

215 E 42ND STREET
18TH FLOOR
NEW YORK, NY 10017

New Principal Place of Business:

6021 ORIENT RD
TAMPA, FL 33610

Current Mailing Address:

215 E 42ND STREET
18TH FLOOR
NEW YORK, NY 10017

New Mailing Address:

6021 ORIENT RD
TAMPA, FL 33610

FEI Number: 26-2947908

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHJORRING, CASPER B
Address: % 215 E 42ND ST, 18TH FLOOR
City-St-Zip: NEW YORK, NY 10017

Title: S () Delete
Name: BERNSTEIN, DANIEL L
Address: 260 MADISON AVENUE, 17TH FLOOR
City-St-Zip: NEW YORK, NY 10016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHJORRING, CASPER B
Address: 6021 ORIENT RD
City-St-Zip: TAMPA, FL 33610

Title: S (X) Change () Addition
Name: BERNSTEIN, DANIEL L
Address: 6021 ORIENT RD
City-St-Zip: TAMPA, FL 33610

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CASPER B SCHJORRING

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08/15/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date