

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000049997 (8)

1. Corporation Name

HELIX INTERNATIONAL GROUP, INC.



Principal Place of Business

Mailing Address

2967 ATLANTIC AVE
STE 1603
DAYTONA BCH SHORES FL 32118

2967 ATLANTIC AVE
STE 1603
DAYTONA BCH SHORES FL 32118

2. Principal Place of Business

21 Suite, Apt #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

06/21/1993

3a. Date of Last Report

04/17/1995

4. FET Number

59-3238375

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CARR, DWANE
105 E ROBINSON ST
S-515
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name

FRANK FINKBINER

82

Street Address (P.O. Box Number is Not Acceptable)

105 E Robinson St

83

S-515

84

City ORLANDO

FL

85 Zip Code 32801

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

FRANK FINKBINER

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

7/22/96

Date

12. OFFICERS AND DIRECTORS

TITLE D
NAME LANTZ, EVELYN B
STREET ADDRESS 3967 S ATLANTIC AVE, STE 1603
CITY-ST-ZIP DAYTONA BCH SHORES FL 32118

TITLE
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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address

SIGNATURE:

Evelyn B. Lantz

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/22/96

Date

Registered Agent

CR2E034 (3/96)