## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** Jul 23, 1999 8:00 am Secretary of State 07-23-1999 90004 005 \*\*\*150.00

	MENT # P98000 ENTERPRISES, INC.	094694				1848 (1841 1841 1848 1844 1844 1884 1884	
Principal Place	e of Business	Mailing Address				Mairo I <b>a</b> ius aidin osiio soii osoi shas	
555 N.W 29TH ST. 555 N.W 29TH ST. MIAMI FL 33127 MIAMI FL 33127					DO NOT WRITE IN	this space	
					3. Date Incorporated or Qualified	THIS SPACE	
					11/09/1998		
2. Principal P	Principal Place of Business     2a. Mailing Address				4. FEI Number	Applied For	
21 5555 GIII AVL 26 SAM					65-0874275	Not Applicable	
Suite, Apt.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 🥕 🥆	Country	Zip	Cour	itry	8. This corporation owes the current year	ar C	
24 ララ	9. Name and Address of Curren	29	30]		Intangible Personal Property.  10. Name and Address of New Register		
	a. Maine and Address of Culten	r radiotaien wäeut		81 Name	Hallie alta Aquiresa Ol Hem Neglate		
KARPEL, DINA				00 00 0 44	VI (DO D. Maril et Mathematical)		
5555 COLLINS AVE. #4H			ł	82 Street Add	dress (P.O. Box Number is Not Acceptable)		
MIAN	/I BEACH FL 33140		Ţ	83			
				84 City		85 Zip Code	
					FL 35 Zip code		
agent. I a	arn familiar with, and accept the obligation of the colligation of the	ations of, section 607.050	(NOTE: Register	ites.	on's board of directors. I hereby accept the a		
12.	- <del>_</del>	ID DIRECTORS	13.	<u> </u>	ADDITIONS/CHANGES TO OFFICER	Change Addition	
NAME	PRESIDENT LIDELETE		1.2 NAM			S AND DIRECTORS IN 12 Change Addition	
STREET ADDRESS 45 20 THICKET TIZAIL				EET ADDRESS		\(\int_{\text{i}}^2\)	
CITY-ST-ZIP	LITHONIA, GA 300	58	1.4 CIT	Y-ST-ZIP			
TITLE	Secremer	DELE	2.1 TITL	E		Change Addition	
NAME	DINAKARPEL		2.2 NA	Æ )		}	
STREET ADDRESS 5555 COLLINS AVE 444			2.3 STR	2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI BRACH F			Y-ST-ZIP			
TITLE		L DELE	3.1 TITL 3.2 NAM			Change Addition	
NAME STREET ADDRESS							
STREET ADDRESS				EET ADDRESS Y-ST-ZIP			
CITY_ST_7ID							
CITY-ST-ZIP TITLE	<del></del>	DELE	Έ 4.1 ΤΩ	.E		Change Addition	
		DELE	4.1 T/TL 4.2 NAM	1		Change Addition	
TITLE		OELE	4.2 NAM	1		Change Addition	
TITLE NAME		☐ DELE	4.2 NAM 4.3 STR	AE		Change Addition	
TITLE NAME STREET ADDRESS		DELE	4.2 NAF 4.3 STR 4.4 CIT E 5.1 TITL	AE EET ADORESS Y-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			4.2 NAM 4.3 STR 4.4 CIT FE 5.1 TITL 5.2 NAM	ME EET ADORESS (-ST-ZIP E			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			4.2 NAM 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAM 5.3 STR	ME EET ADDRESS  /-ST-ZIP  E AE EET ADDRESS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELE	4.2 NAM 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAM 5.3 STR 5.4 CIT	AE EET ADDRESS  Y-ST-ZIP  AE EET ADDRESS  Y-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			4.2 NAM 4.3 STR 4.4 CIT 5.1 TITL 5.2 NAM 5.3 STR 5.4 CIT 6.1 TITL	AE EET ADDRESS  /-ST-ZIP  AE EET ADDRESS  /-ST-ZIP  E			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DELE	4.2 NAM 4.3 STR 4.4 CIT 5.1 TITI 5.2 NAM 5.3 STR 5.4 CIT 6.2 NAM	AE EET ADDRESS  (-ST-ZIP E EET ADDRESS  (-ST-ZIP EET ADDRESS  (-ST-ZIP E		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELE	4.2 NAM 4.3 STR 4.4 CIT 5.1 TITI 5.2 NAM 5.3 STR 5.4 CIT 6.1 TITI 6.2 NAM 6.3 STR	AE EET ADDRESS  /-ST-ZIP  AE EET ADDRESS  /-ST-ZIP  E		Change Addition	

an officer or director of the copyolation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address.

SIGNATURE:

DINA KARPEL

## Helios Enterprises, inc. 5555 Collins Ave. #4H, Miami Beach, FL 33140

P9 8000094694 594549-9004-5

July 12th, 1999

Florida Dept of State Division of Corporations

**RE: CORPORATION ANNUAL REPORT** 

HELIOS ENTERPRISES, INC DOC#; P98000094694

To Whom it may concern:

Please be advised that we never received the 1999 Corporation Annual Report that was supposedly mailed out in January.

This corporation was just incorporated in Nov of 1998 and this is our first report filling. We have had had no previous experience to have been expecting a report at the beginning of the year. We sincerely hope that you will take this into account when deciding whether to eliminate the \$400.00 penalty.

Thanking you in advance for your cooperation,

Dina Karpel

Helios Enterprises, inc.