

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90082 036 ***158.75

DOCUMENT # P99000007273

1. Entity Name

HELIX BUSINESS SOLUTIONS, INC.

Principal Place of Business

Mailing Address

12161 SOUTHWEST 50TH COURT
 FORT LAUDERDALE FL 33330

12161 SOUTHWEST 50TH COURT
 FORT LAUDERDALE FL 33082-1482

2. Principal Place of Business

13592 N.W. 6th St.

3. Mailing Address

PO Box 821482

Suite, Apt. #, etc.

#101

Suite, Apt. #, etc.

City & State

Pembroke Pines

City & State

Pembroke Pines, FL

4. FEI Number

65-0891014

Applied For

Not Applicable

Zip

33028

Country

USA

Zip

33082

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134~~

Name

Bernard V. Abtan

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

13592 NW 6th St, #101

City

Pembroke Pines

FL

Zip Code

33028

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.

SIGNATURE

[Signature]

Bernard Abtan

1105/2000

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PSTD	ABTAN, BERNARD V	12161 SOUTHWEST 50TH COURT	FORT LAUDERDALE FL 33330	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
PSTD	ABTAN, Bernard V.	13592 NW 6th St, #101	Pembroke Pines, FL 33028	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bernard Abtan 1105/2000

Date

Daytime Phone #

(954) 599-3078

CR2E034 (9/99)