
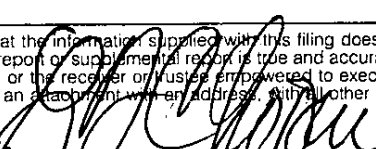


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 23, 2006 8:00 am**  
**Secretary of State**

03-23-2006 90022 017 \*\*\*150.00

<b>DOCUMENT # S98508</b> 1. Entity Name <b>HELTA CORPORATION</b>					
Principal Place of Business <b>ONE N CLEMATIS STREET WEST PALM BEACH FL 33401 US</b>				Mailing Address <b>P.O. BOX 4297 WEST PALM BEACH FL 33402 US</b>	
2. Principal Place of Business <b>515 N. Flagler Drive</b> Suite, Apt. #, etc. <b>Suite 300 P</b>				3. Mailing Address Suite, Apt. #, etc. 	
City & State <b>West Palm Beach, FL</b>		City & State 		4. FEI Number <b>65-0304528</b>	
Zip <b>33401</b>		Country <b>US</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>CHOPIN, L. FRANK ONE N CLEMATIS STREET WEST-PALM BEACH FL 33401</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>515 N. Flagler Drive</b> <b>Suite 300 P</b> City <b>West Palm Beach FL</b> Zip Code <b>33401</b>	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing <b>\$5.00 May Be</b> Trust Fund Contribution. <input type="checkbox"/> <b>Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CHOPIN, L. FRANK ONE N CLEMATIS STREET WEST PALM BEACH FL 33401	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>515 N. Flagler Dr., Ste 300P West Palm Beach, FL 33401</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FORD, KATHLEEN DUROSS ONE N CLEMATIS STREET WEST PALM BEACH FL 33401	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>515 N. Flagler Dr., Ste 300P West Palm Beach, FL 33401</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> 			<b>3/10/06</b> <b>561-655-9500</b>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

ATTACHMENT ATTACHMENT  
DISTINGUISHED  
MANAGEMENT, INC.

50005160

2200 N. FLORIDA MANGO RD.  
SUITE 402  
WEST PALM BEACH, FL 33409  
TELEPHONE: (561) 688-8933

MAILING ADDRESS:  
P.O. BOX 4297  
WEST PALM BEACH, FL 33402  
FACSIMILE: (561) 688-8973

March 13, 2006

Division of Corporations  
Annual Report Section  
P.O. Box 6327  
Tallahassee, FL 32314

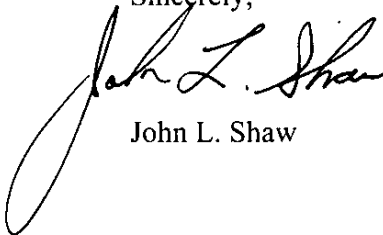
Re: Helta Corporation  
Document #S98508

Dear Sir or Madam:

I enclose the 2006 Annual Report and \$150.00 filing fee for the above referenced corporation.

Please telephone me, should you have any questions.

Sincerely,



John L. Shaw

JLS/amc  
Enclosures