


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90317 039 ***150.00

DOCUMENT # P03000155631

1. Entity Name
OVERLOAD, INC.



Principal Place of Business Mailing Address
1865 ONTARIO CT **1865 ONTARIO CT**
MIDDLEBURG, FL 32068 **MIDDLEBURG, FL 32068**

50037262

2. Principal Place of Business 3. Mailing Address
2654-B San Francisco Blvd **2654-B San Francisco Blvd**
 Suite, Apt. #, etc. Suite, Apt. #, etc.



04052005 Chg-P CR2E034 (10/03)

City & State City & State
Orange Park FL **Orange Park FL**
 Zip Country Zip Country
32065 **Fla** **32065** **Fla**

4. FEI Number Applied For
05-0593448 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
MELLIES, ERIC
1865 ONTARIO CT
MIDDLEBURG, FL 32068

7. Name and Address of New Registered Agent
 Name **Mellies Eric**
 Street Address (P.O. Box Number is Not Acceptable) **2654-B San Francisco Blvd**
 City **Orange Park** FL Zip Code **32065**

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 *E Mellies* DATE 4-13-05

Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD MELLIS, ERIC 1865 ONTARIO CT MIDDLEBURG, FL 32068 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD MELLIS, ERIC 1865 ONTARIO CT MIDDLEBURG, FL 32068 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Eric Mellies <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2654-B San Francisco Blvd Orange Park FL 32065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mellies, Eric <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2654-B San Francisco Blvd Orange Park FL 32065
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *E Mellies* Date 4-13-05 Daytime Phone # 904-434-0076

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR