

2005 FOR PROFIT CORPORATION ANNUAL REPORT

112

DOCUMENT # P04000119296

1. Entity Name
OVER MY HEAD, INC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 NOV 29 PM 3:48

Principal Place of Business
115 POINT CIRCLE
TEQUESTA, FL 33469 US

Mailing Address
115 POINT CIRCLE
TEQUESTA, FL 33469 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



REINSTATEMENT
10/03

4. FEI Number

05-0607232

Applied For
Not Applicable

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

LIVESAY, JOE A
115 POINT CIRCLE
TEQUESTA, FL 33469

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	LIVESAY, JOE A	
STREET ADDRESS	115 POINT CIRCLE	
CITY - ST - ZIP	TEQUESTA, FL 33469	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY - ST - ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	4/28/05 90181 021 150.00
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 or liquidator of the corporation; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, and all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/05 301-780-4982
Date Daytime Phone #

11/29

2/2

**Over My Head, Inc.
Joe Livesay
115 Point Circle
Tequesta, FL 33469**

November 14, 2005

**Division of Corporations
P.O.Box 6198
Tallahassee, FL 32314-6198**

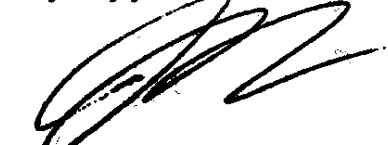
**Re: Over My Head, Inc. 2005 Annual Corporate Report
P04000119296 Federal I.D. 05-0607232**

Dear Sir or Madam:

Per my conversation with your office I understand the enclosed Notice of Dissolution or Revocation resulted from a request for additional information sent some months ago in which you requested my Federal I.D. number. Enclosed please find copies of both your Notice of Dissolution and my 2005 Annual Corporate Report which I submitted and paid for on April 16, 2005. The Federal ID number is penciled in. I did not receive your request or requests for additional information and therefore, respectfully request abatement of the \$600.00 fine and reinstatement of corporate status.

Thank you for your attention to this request.

Very truly yours,



Joe Livesay

Encl.