

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000072822

Entity Name: HEM OVER HEELS INC.

FILED
Mar 02, 2009
Secretary of State

Current Principal Place of Business:

9354 SW 3RD ST.
610
BOCA RATON, FL 33428

Current Mailing Address:

9354 SW 3RD ST.
610
BOCA RATON, FL 33428

New Principal Place of Business:

10833 S JOG ROAD
188
BOYNTON BEACH, FL 33437-091 US

New Mailing Address:

10833 S JOG ROAD
188
BOYNTON BEACH, FL 33437-091 US

FEI Number: 01-0910438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAYNARD, JOCELYN
3011 YAMATO RD.
SUITE A-4
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

GONZAGA, FATIMA D
9354 SW 3RD STREET
APT 610
BOCA RATON, FL 33428 US

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: FATIMA D. GONZAGA

03/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GONZAGA, FATIMA
Address: 9354 SW 3RD ST. # 610
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: MAYNARD, JOCELYN
Address: 9354 SW 3RD ST. # 610
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GONZAGA, FATIMA D
Address: 9354 SW 3RD ST. # 610
City-St-Zip: BOCA RATON, FL 33428

Title: DVP (X) Change () Addition
Name: MAYNARD, JOCELYN
Address: 9354 SW 3RD ST. # 610
City-St-Zip: BOCA RATON, FL 33428

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FATIMA D. GONZAGA

PRES

03/02/2009

Electronic Signature of Signing Officer or Director

Date