

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000021371 (8)

1. Corporation Name

OVERWHELMED AGAIN, INC.

Principal Place of Business

18789 BISCAYNE BLVD
AVENTURA FL 33180

Mailing Address

18789 BISCAYNE BLVD
AVENTURA FL 33180



3. Date Incorporated or Qualified

03/23/1993

3a. Date of Last Report

03/29/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

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30

9. Name and Address of Current Registered Agent

DENNIS BERGMAN
18789 BISCAYNE BLVD
AVENTURA FL 32301

4. FEI Number

65-0426359

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

1. TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

D
BERGMAN, EMILY
20677 NW 26TH AVE
BOCA RATON FL 33434

2. TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

D
BERGMAN, DENNIS
20677 NW 26TH AVE
BOCA RATON FL 33434

3. TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

D
BORDEN, JASON
5063 HEATHERHILL LANE #7
BOCA RATON FL

4. TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

5. TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

6. TITLE

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CITY- ST- ZIP

11. TITLE

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STREET ADDRESS

CITY- ST- ZIP

12. TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

2. TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

3. TITLE

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CITY- ST- ZIP

13. TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

DENNIS BERGMAN

2/14/96

305-933-0709

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)