

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000073621

Entity Name: OVER THE TOP, INC.

FILED
Jan 04, 2005
Secretary of State

Current Principal Place of Business:

11880 W. STATE RD. 84
SUITE 5
FT LAUDERDALE, FL 33325 US

New Principal Place of Business:

Current Mailing Address:

11880 W. STATE RD. 84
SUITE 5
FT LAUDERDALE, FL 33325 US

New Mailing Address:

FEI Number: 65-0454242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EINGOLD, NANCY
10847 CHARLESTON PLACE
COOPER CITY, FL 33026 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: EINGOLD, NANCY
Address: 10847 CHARLESTON PL.
City-St-Zip: COOPER CITY, FL 33026

Title: VD () Delete
Name: EINGOLD, ALAN
Address: 500 SW 108 AVE APT 208
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALAN EINGOLD

MR

01/04/2005

Electronic Signature of Signing Officer or Director

Date