

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90045 035 ***150.00

DOCUMENT # P94000073917																																																											
1. Entity Name OVERLAND SERVICES, INC.																																																											
Principal Place of Business 5020 SANTA FE ST. TAMPA, FL 33619			Mailing Address 5020 SANTA FE ST. TAMPA, FL 33619 US																																																								
2. Principal Place of Business - No P.O. Box # 2811 N 62ND ST		3. Mailing Address 2811 N 62ND ST																																																									
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																									
City & State TAMPA FL		City & State TAMPA, FL																																																									
Zip 33619		Zip 33619																																																									
6. Name and Address of Current Registered Agent MEROLA, SALVATORE 5020 SANTA FE ST. TAMPA, FL 33619				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2811 N 62ND ST City TAMPA FL Zip Code 33619																																																							
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 65%; padding: 2px;">D MEROLA, ELSA V 5020 SANTA FE ST. TAMPA, FL 33619</td> <td style="width: 20%; padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 65%; padding: 2px;">2811 N 62ND ST TAMPA, FL 33619</td> <td style="width: 20%; padding: 2px; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">MEROLA, SALVATORE</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;">2811 N 62ND ST TAMPA, FL 33619</td> <td style="padding: 2px; text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">5020 SANTA FE ST.</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;">2811 N 62ND ST</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">TAMPA, FL 33619</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">TAMPA, FL 33619</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">TAMPA, FL 33619</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">TAMPA, FL 33619</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">TAMPA, FL 33619</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">TAMPA, FL 33619</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">TAMPA, FL 33619</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">TAMPA, FL 33619</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">TAMPA, FL 33619</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Delete</td> <td style="padding: 2px;">CITY-ST-ZIP</td> <td style="padding: 2px;">TAMPA, FL 33619</td> <td style="padding: 2px; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	D MEROLA, ELSA V 5020 SANTA FE ST. TAMPA, FL 33619	<input type="checkbox"/> Delete	TITLE	2811 N 62ND ST TAMPA, FL 33619	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	MEROLA, SALVATORE	<input type="checkbox"/> Delete	NAME	2811 N 62ND ST TAMPA, FL 33619	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	STREET ADDRESS	5020 SANTA FE ST.	<input type="checkbox"/> Delete	STREET ADDRESS	2811 N 62ND ST	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CITY-ST-ZIP	TAMPA, FL 33619	<input type="checkbox"/> Delete	CITY-ST-ZIP	TAMPA, FL 33619	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CITY-ST-ZIP	TAMPA, FL 33619	<input type="checkbox"/> Delete	CITY-ST-ZIP	TAMPA, FL 33619	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CITY-ST-ZIP	TAMPA, FL 33619	<input type="checkbox"/> Delete	CITY-ST-ZIP	TAMPA, FL 33619	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CITY-ST-ZIP	TAMPA, FL 33619	<input type="checkbox"/> Delete	CITY-ST-ZIP	TAMPA, FL 33619	<input type="checkbox"/> Change <input type="checkbox"/> Addition	CITY-ST-ZIP	TAMPA, FL 33619	<input type="checkbox"/> Delete	CITY-ST-ZIP	TAMPA, FL 33619	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, who is either like empowered.																																																											
SIGNATURE: SALVATORE R MEROLA 4/1/08 772-201-2403 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																											