

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000056616

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: OFF THE TOP OF YOUR HEAD, INC.

## Current Principal Place of Business:

1542 S. WICKHAM RD  
SUITE B  
WEST MELBOURNE, FL 32904

## New Principal Place of Business:

21 SAPPHIRE ST  
MELBOURNE, FL 32904

## Current Mailing Address:

1542 S. WICKHAM RD  
SUITE B  
WEST MELBOURNE, FL 32904

## New Mailing Address:

21 SAPPHIRE ST  
MELBOURNE, FL 32904

FEI Number: 59-3462077

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PUTRELO, MAURICE  
1542 S WICKHAM RD  
MELBOURNE, FL 32904

## Name and Address of New Registered Agent:

PUTRELO, MAURICE  
21 SAPPHIRE ST  
MELBOURNE, FL 32904

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: MAURICE PUTRELO

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: PUTRELO, MAURICE  
Address: 1542 WICKHAM RD  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D ( ) Delete  
Name: PUTRELO, JEANNINE  
Address: 269 NAUGATUCK AVENUE  
City-St-Zip: MILFORD, CT 06460

## 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: MAURICE PUTRELO

PRES

04/30/2004

Electronic Signature of Signing Officer or Director

Date