2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000062457

Entity Name: ROAD RESCUERS, INC.

FILED Jul 03, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1413 N.W. 80TH WAY PLANTATION, FL 33322

Current Mailing Address: New Mailing Address:

1413 N.W. 80TH WAY PLANTATION, FL 33322

FEI Number: 65-0931405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLEURISTIN, ROLLA KERNISAN
1413 N.W. 80TH WAY
PLANTATION, FL 33322 US
FLEURISTIN, ANDRE-PIERRE
1413 N.W. 80TH WAY
PLANTATION, FL 33322 US
FLEURISTIN, ANDRE-PIERRE
1413 N.W. 80TH WAY
PLANTATION, FL 33322 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: ANDRE-PIERRE FLEURISTIN 07/03/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition FLEURISTIN, ANDRE PIERRE FLEURISTIN, ANDRE PIERRE Name: Name: 1413 N.W. 80TH WAY 1413 N.W. 80TH WAY Address: Address: City-St-Zip: PLANTATION, FL 33322 City-St-Zip: PLANTATION, FL 33322 US Title: () Delete Title: D/VP () Change (X) Addition

Title: () Delete Title: D/S () Change (X) Addition Name: FLEURISTIN, ANDRE PIERRE

 Name:
 Name:
 FLEURISTIN, ANDRE PIERR

 Address:
 Address:
 1413 N.W. 80TH WAY

 City-St-Zip:
 City-St-Zip:
 PLANTATION, FL 33322 US

Title: () Delete Title: D/T () Change (X) Addition

 Name:
 Name:
 KERNISAN, YOLETTE

 Address:
 Address:
 235 WEST 102ND STREET

 City-St-Zip:
 City-St-Zip:
 NEW YORK, NY 10025 US

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: ANDRA-PIERRE FLEURISTIN D/P 07/03/2004