2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000078388

Entity Name: RUSH HOUR INC.

FILED Feb 15, 2005 Secretary of State

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

1821 NW 108TH AVENUE ONE OAKWOOD BLVD PEMBROKE PINES, FL 33026

SUITE 120

HOLLYWOOD, FL 33020

Current Mailing Address: New Mailing Address:

1821 NW 108TH AVENUE ONE OAKWOOD BLVD PEMBROKE PINES, FL 33026 SUITE 120

HOLLYWOOD, FL 33020

FEI Number: 55-0840406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KURILLA, TRACEY BRUCKNER, MITCH CPA 4992 NORTH PINE ISLAND RD 1821 NW 108TH AVENUE PEMBROKE PINES, FL 33026 US LAUDERHILL, FL 33351

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: MITCH BRUCKNER 02/15/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition CARRION, MONICA CARRION, MONICA Name: Name: 4550 SW 42 TERRACE 5066 SW 24TH AVENUE Address: Address:

FORT LAUDERDALE, FL 33314 City-St-Zip: FORT LAUDERDALE, FL 33312

Title: Title: PD (X) Change () Addition () Delete Name: KURILLA, TRACEY Name: KURILLA, TRACEY 1821 NW 108TH AVENUE 1821 NW 108TH AVENUE Address: Address:

PEMBROKE PINES, FL 33026 PEMBROKE PINES, FL 33026 City-St-Zip: City-St-Zip:

Title: Title: () Delete STD (X) Change () Addition STUART, CATHY Name: STUART, CATHY Name:

20937 BAY COURT #113 20937 BAY COURT #113 Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180

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.

VΡ SIGNATURE: MONICA A CARRION 02/15/2005