

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000056410

FILED
Sep 04, 2007
Secretary of State

Entity Name: RESPECT THE HUSTLE, INC.

Current Principal Place of Business:

1489 CANDLEWYCK DR.
ORLANDO, FL 32807

New Principal Place of Business:

5465 CURRY FORD RD.
APT.H4
ORLANDO, FL 32812

Current Mailing Address:

1489 CANDLEWYCK DR.
ORLANDO, FL 32807

New Mailing Address:

5465 CURRY FORD RD.
APT. H4
ORLANDO, FL 32812

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

Name and Address of Current Registered Agent:

MILKEZ, SAMUEL
1489 CANDLEWYCK DR.
ORLANDO, FL 32807 US

Name and Address of New Registered Agent:

MILKEZ, SAMUEL
5465 CURRY FORD RD.
APT. H4
ORLANDO, FL 32812 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:

09/04/2007

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:

Title: D () Delete
Name: FELICIANO, JESUS
Address: 1489 CANDLEWYCK DR.
City-St-Zip: ORLANDO, FL 32807

Title: D () Delete
Name: MILKEZ, SAMUEL
Address: 1489 CANDLEWYCK DR.
City-St-Zip: ORLANDO, FL 32807

Title: P () Delete
Name: MILKEZ, SAMUEL
Address: 1489 CANDLEWYCK DR.
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FELICIANO, JESUS
Address: 5465 CURRY FORD RD. APT.H4
City-St-Zip: ORLANDO, FL 32812

Title: D (X) Change () Addition
Name: MILKEZ, SAMUEL
Address: 5465CURRYFORD RD.APT.H4
City-St-Zip: ORLANDO, FL 32812

Title: P (X) Change () Addition
Name: MILKEZ, SAMUEL
Address: 5465 CURRY FORD RD. APT H4
City-St-Zip: ORLANDO, FL 32812

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SAMUEL MILKEZ

P

09/04/2007

Electronic Signature of Signing Officer or Director

Date