

2004 FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State

04-07-2004 90048 039 ***150.00

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1. Entity Name
RUSH STREET ADVERTISING & PROMOTIONS, INC.



Principal Place of Business
1281 N.W. 184 TERRACE
PEMBROKE PINES, FL 33029

Mailing Address
1281 N.W. 184 TERRACE
PEMBROKE PINES, FL 33029

54028012



DO NOT WRITE IN THIS SPACE

01262004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0916165

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

PAZMINO, EDUARDO
5791 PLUNKETT ST #3
HOLLYWOOD, FL 33023

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PAZMINO, EDUARDO
STREET ADDRESS	1281 N.W. 184 TERRACE
CITY-ST-ZIP	PEMBROKE PINES, FL 33029
TITLE	VP
NAME	PAZMINO, JESUS
STREET ADDRESS	1281 N.W. 184 TERRACE
CITY-ST-ZIP	PEMBROKE PINES, FL 33029
TITLE	T
NAME	PAZMINO, MIRYAN
STREET ADDRESS	1281 N.W. 184 TERRACE
CITY-ST-ZIP	PEMBROKE PINES, FL 33029
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/04
Date

Daytime Phone #