

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Aug 18, 2009
Secretary of State**

DOCUMENT# P03000086638

Entity Name: SEARS PEST CONTROL INC.

Current Principal Place of Business:

4692 N POWERLINE ROAD
DEERFIELD BCH, FL 33073

New Principal Place of Business:

4624 N POWERLINE ROAD
DEERFIELD BCH, FL 33073

Current Mailing Address:

4692 N POWERLINE ROAD
DEERFIELD BCH, FL 33073

New Mailing Address:

4624 N POWERLINE ROAD
DEERFIELD BCH, FL 33073

FEI Number: 56-2413533 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAVITSKY, ALAN
4692 N POWERLINE ROAD
DEERFIELD BCH, FL 33073 US

Name and Address of New Registered Agent:

KRAVITSKY, ALAN
4624 N POWERLINE ROAD
DEERFIELD BCH, FL 33073 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: ALAN KRAVITSKY 08/18/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PV () Delete
Name: KRAVITSKY, ALAN
Address: 7644 BRUNSON CIR
City-St-Zip: LAKEWORTH, FL 33467

Title: VP () Delete
Name: DIANE, KRAVITSKY
Address: 7644 BRUNSON CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: KRAVITSKY, DIANE
Address: 7644 BRUNSON CIRCLE
City-St-Zip: LAKE WORTH, FL 33467

Title: T () Change (X) Addition
Name: KRAVITSKY, ROBERT
Address: 4624 N POWERLINE ROAD
City-St-Zip: DEERFIELD BEACH, FL 33073

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: ALAN KRAVITSKY P 08/18/2009
Electronic Signature of Signing Officer or Director Date