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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

96 JAN 22 PM 2: 22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S52731 (4)

1. Corporation Name

PROFESSIONAL PEST SERVICES INC.

Principal Place of Business

3840 NW 126TH AVENUE
CORAL SPRINGS FL 33065

Mailing Address

3840 NW 126TH AVENUE
CORAL SPRINGS FL 33065

3. Date Incorporated or Qualified
05/15/1991

3a. Date of Last Report
01/19/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEINBERG, HERBERT
3840 NW 126TH AVENUE
CORAL SPRINGS FL 33065

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and the filer, if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME MCWADE, MARGARET
STREET ADDRESS 1000 RIVER REACH DR #201
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE VP ☐ DELETE

NAME WEBER, NANCY
STREET ADDRESS 4700 NW 98 WAY
CITY-ST-ZIP CORAL SPRINGS FL

TITLE S ☐ DELETE

NAME WEBER, THOMAS
STREET ADDRESS 4700 NW 98 WAY
CITY-ST-ZIP CORAL SPRINGS FL

TITLE T ☐ DELETE

NAME SILVANI, RICHARD G.
STREET ADDRESS 1000 RIVER REACH DR #201
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP ☐ DELETE

NAME
STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

400001701494
-01/30/96-01084-012

****200.00 ****200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Richard A. Silvani
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-17-96

Date

305-755-9400

Daytime Phone #

CR2E034 (12/95)