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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 25 1997 8:00am

Secretary of State

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000090406 (6)

BUGS RX PEST CONTROL INC.

Principal Place of Business	Mailing Address			·		ESINE (\$11) \$6111 9(6)1 0:	JIH 814 1881
2671 SW 87 TR 2671 SW 87 TR							
PVT	PVT DAVIE EL 22220				ļ		
DAVIE FL 33328 US	DAVIE FL 33328 US				3. Date Incorporated or Qualified	3a. Date of Last	t Report
••					11/27/1995	04/25/1996	
2. Principal Place of Business	2a. Mailing Address			····	4. FE) Number		Applied For
21	26				65-0624869	X	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1 7	5 Additional
City & State	City & State				A Floring O		Required
23	28				Election Campaign Financing Trust Fund Contribution		May Be ed to Fees
Zip Country	Zip	Cour	ntry		B. This corporation has liability for in		
24 25	29				Florida Statutes		
9. Name and Address of Current R	egistered Agent		.		10. Name and Address of New Reg	jistered Agent	
HEISS, WILLIAM V			81	Name			
2671 S/W 87 TR.			82	Street Addre	ess (P.O. Box Number is Not Acceptabl	le)	
DAVIE FL 33328		-	83				
		'	84 (City		FL 85 Zi	ip Code
11. Pursuant to the provisions of Sections 607,0502 a	nd 607.1508, Florida Statu	iles, the ab	ove-r	named corpo	oration submits this statement for the pr	urpose of changing	g its registered
office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligatio	Florida. Such change was ns of, Section 607.0505. F	s authorized Florida Statu	i by ti Jies.	ne corporatio	on's board of directors. Thereby accept	t the appointment	as registered
SIGNATURE							ĺ
Signature, typed or printed name of registered agent a			Agenti	signature required	d when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	000 (1) 40
TITLE P	DELETE	13.	l F		ADDITIONS/CHANGES TO OFFIC	Chang	
NAME HEISS, WILLIAM V		1.2 NAM					
STREET ADDRESS 2671 S/W 87 TR.			REET AD	DRESS			
CITY-ST-ZIP DAVIE FL 33328			Y-S1-2				1
TITLE V	☐ DELETE	21 1171	LF				į
NAME HEISS, CYNTHIA L	2.2					Chang	e 🔲 Addition
STREET ADDRESS 2671 S/W 87 TR.		2.2 NA	ME			Chang	e 🔲 Addition
CITY-ST-ZIP DAVIE FL 33328 TITLE ST			ME BEET AD	DRESS		☐ Chang	e Addition
- ·	Photograph	2.3 STR 2 4 CIT	REFT AD 1Y - S1 -	ì		<u>.</u>	
	DELETE	2.3 \$18 2 4 CH 3.1 7HL	REFT AD 1Y-S1- LF	ì		☐ Chang	
NAME HEISS, PATRICIA E STREET ADDRESS 2671 S.W. 87 T.R.	DELETE	2.3 STR 2 4 CH 3.1 THU 3.2 NAM	REFT AD 1Y-S1- LE ME	ZIP		<u>.</u>	
STREET ADDRESS 2671 S/W 87 TR.	DELETE	2.3 STR 2 4 CH 3.1 THL 3.2 NAN 3.3 STR	REFT AD 1Y-S1- LF ME REFT AD	ZIP IDRESS		<u>.</u>	
	☐ DELETE	2.3 STR 2 4 CH 3.1 THL 3.2 NAN 3.3 STR	REFT AD 1Y-S1- LF ME HEFT AD 1Y-S1-	ZIP IDRESS		<u>.</u>	e [_] Addition
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### STREET ADDRESS 2671 S/W 87 TR.		2.3 STR 2.4 CH 3.1 THI 3.2 NAN 3.3 STH 3.4 CH 4.1 THI 4.2 NA	REFT AD 1Y-S1- LF ME HEFT AD 1Y-S1- LE	ZIP IDRESS ZIP		Chang	e [_] Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	☐ DELETE	2.3 STR 2.4 CH 3.1 THI 3.2 NAN 3.3 STR 3.4 CH 4.1 THI 4.2 NA 4.3 STR 4.4 CH 5.1 THE 5.2 NAN 5.3 STR	REFT AD LE ME HEFT AD LY-SI- LE ME HEFT AD LE HEFT AD LE ME HEFT AD LE ME HEFT AD LE LE ME HEFT AD LE LE LE LE LE LE LE LE LE	ZIP IDRESS ZIP ORESS ZIP ORESS		Chang	e Addition e Addition e Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if charged, or on an attachment with an address.

SIGNATURE.