

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000090406

FILED  
Feb 05, 2012  
Secretary of State

**Entity Name:** BUGS RX PEST CONTROL INC.

**Current Principal Place of Business:**

3828 CYPRESS LAKE DRIVE  
LAKE WORTH, FL 33467 US

**New Principal Place of Business:**

**Current Mailing Address:**

3828 CYPRESS LAKE DR  
LAKE WORTH, FL 33467 US

**New Mailing Address:**

3828 CYPRESS LAKE DRIVE  
LAKE WORTH, FL 33467 US

**FEI Number:** 65-0624869

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CANNETO, FRANK S  
3828 CYPRESS LAKE DR.  
LAKE WORTH, FL 33467 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: HEISS, WILLIAM V  
Address: 3828 CYPRESS LAKE DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

Title: V  
Name: CANNETO, DENISE  
Address: 3828 CYPRESS LAKE DRIVE  
City-St-Zip: LAKE WORTH, FL 33467

Title: ST  
Name: HEISS, PATRICIA E  
Address: 2948 TALL OAK COURT  
City-St-Zip: DAVIE, FL 33328

Title: O  
Name: CANNETO, FRANK S  
Address: 3828 CYPRESS LAKE DR.  
City-St-Zip: LAKE WORTH, FL 33467

I hereby 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 all other like empowered.

**SIGNATURE:** FRANK CANNETO

O

02/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date