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: PEDRO SANTOS

Electronic Signature of Signing Officer/Director Detail

2314 JOHNSON ST APT 18

FEI Number: 83-0827127

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

SANTOS, PEDRO 2314 JOHNSON ST APT 18 HOLLYWOOD, FL 33020 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:

Title	Р	Title	VP
Name	SANTOS, PEDRO	Name	DE LIMA COSTA, EMMANUEL
Address	2314 JOHNSON ST APT 18	Address	2314 JOHNSON ST APT 18
City-State-Zip:	HOLLYWOOD FL 33020	City-State-Zip:	HOLLYWOOD FL 33020

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000052095

Entity Name: CARE4 PEST SERVICES CORP

Current Principal Place of Business:

2314 JOHNSON ST APT 18 HOLLYWOOD, FL 33020

Current Mailing Address:

HOLLYWOOD, FL 33020

Officer/Director Detail :

Certificate of Status Desired: No

Date

03/26/2020

FILED Mar 26, 2020 Secretary of State 6067536495CC

Date

PRESIDENT