

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 290998

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** BAY EXTERMINATORS, INC.

**Current Principal Place of Business:**

2901 W BUSH BLVD  
SUITE # 805  
TAMPA, FL 33618

**New Principal Place of Business:**

**Current Mailing Address:**

4608 N VINCENT ST  
TAMPA, FL 33614

**New Mailing Address:**

**FEI Number:** 59-1097790

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIAZ,IVAN  
4608 ST. VINCENT STREET  
TAMPA, FL 33614 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: VSD  
Name: DIAZ,IVAN  
Address: 4608 ST. VINCENT STREET  
City-St-Zip: TAMPA, FL

Title: STD  
Name: DIAZ , PATRICIA  
Address: 2112 W MARQUETTE  
City-St-Zip: TAMPA, FL 33614

Title: PD  
Name: DIAZ, DIANA  
Address: 8808 S LOGOON STREET  
City-St-Zip: TAMPA, FL 33614

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: IVAN DIAZ

PRES

03/21/2012

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

\_\_\_\_\_  
Date