## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 442151

TRUDO EXTERMINATING COMPANY

## **FILED** Mar 08, 1999 8:00 am Secretary of State

03-08-1999 90052 007 \*\*\*150.00



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Principal Place of Business Mailing Address								
4000 NE 2ND 1 POMPANO BEA		4000 NE 2ND TERRACE POMPANO BEACH FL 33064						
FUMENNU BEA	NOTE SOUT	FOMPANO DENOTITE 33004			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
				<u> </u>	12/21/1973	<u>*</u>		, e e ,
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		<del></del>	olied For
21		26			59-1269221	· · ·		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	<b>∃</b>	8.75 A	
22		27			<del>-</del>		Fee Re	<del>`</del>
City & Stat	te	City & State			6. Election Campaign Financing		\$5.00	
23		28	Counts		Trust Fund Contribution		Added to	rees
Zip	Country		Country	,	8. This corporation owes the current	•		□No
24	25 25 25 25 25 25 25 25 25 25 25 25 25 2	29 30			Personal Property Tax.  10. Name and Address of New Reg			
	9. Name and Address of Currer	ır vefisteled Wâsut	81	Name	IU. Haine and Address of Hew Reg	ingranda nge		
TRU	DEAU, (RICHARD J.)		<u> </u>					
	N.E. 2ND TERRACE		82	Street Addr	ress (P.O. Box Number is Not Acceptable	<del>)</del>		
POMPANO BEACH FL 33064			83	<del> </del>		<del></del>		
. •			L					
			84	City		FL 8	5 Zip C	ode
14 Pursuant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statutes ti	he abov	e-named com	poration submits this statement for the pu	rpose of cha	nging its	registered
office or r	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was autho	rized by	the corporation	on's board of directors. I hereby accept t	he appointme	ent as reg	gistered
SIGNATURE		ALCOTE: Down	ntared App.	Anguer county	d when reinstating)	DATE		[
12	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Regination of the control of th	13.	ıı ayınatura redima	ADDITIONS/CHANGES TO OFFIC		IRECTO	RS IN 12
12.	PD OFFICERS AF		1.5 TITLE		ADDITIONAL AND TO STATE OF THE		Change	Addition
NAME	TRUDEAU, (RICHARD J.)	1	1.2 NAME				=	
STREET ADDRESS		ļ		T ADDRESS				}
	POMPANO BEACH FL		1.4 CITY-S					
CITY-ST-ZIP TITLE	S	☐ DELETE	2.1 TITLE	)- UF			Change	Addition
NAME	TRUDEAU, DINORA C	<del></del>	2.2 NAME				-	
STREET ADDRESS				T ADDRESS				ì
	POMPANO BEACH FL		2. 4 CITY-5					
CITY-ST-ZIP TITLE	TOME AIRO DEAOITTE		3.1 TITLE	,, <u>L</u> II			Change	Addition
NAME		_	3.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP	`}		3.4. CITY-5					}
TITLE			4.1 TITLE				Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			_	T ADDRESS				
CITY-ST-ZIP		]	4.4 CITY-9		•			
TITLE		☐ DELETE	5.1 TITLE			Ē	Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	TADDRESS				
CITY-ST-ZIP			5.4 CITY- S	ST-ZIP				
TITLE			6.1 TITLE				Change	☐ Addition
NAME		Ì	6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				
CITY. ST. 7IP	[		6.4 CITY- 8	ļ				

14. I 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 changed, or on an attachment with an address, with all other like empowered.