

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/94: \$228 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUL 18 AM 8:27

DOCUMENT # 481209 (5)

1. Corporation Name

ABSOLUTE TERMITE AND PEST CONTROL CO., INC.

Principal Place of Business

Mailing Address

30325 US HIGHWAY 19 NORTH
CLEARWATER FL 34621-8040

30347 US HIGHWAY 19 NORTH
CLEARWATER FL 34621-8040
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/25/1975

3a. Date of Last Report

03/28/1994

2. Principal Place of Business

21 30347 US Highway 19 N.

2a. Mailing Address

26 Suite, Apt. #, etc.

22

27

City & State

23 CLEARWATER Florida

City & State

28

Zip

24 34621

Country

25

Zip

29

Country

30

4. FEI Number

59-1613044

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,

Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

GRIFFIN, HAROLD H
1455 COURT STREET
CLEARWATER FL

10. Name and Address of New Registered Agent

81 Name

Robert W. ZASIMOVITCH

82 Street Address (P.O. Box Number is Not Acceptable)

5153 GREENWOOD ST.

83

84 City

NEW PORT RICHEY

FL

85 Zip Code

34653

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Robert W. ZASIMOVITCH

Robert W. ZASIMOVITCH

7-1-95

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME ZASIMOVITCH, ROBERT
STREET ADDRESS 5153 GREENWOOD STREET
CITY - ST - ZIP NEW PORT RICHEY FL

TITLE DS
NAME OBIE, LOIS M.
STREET ADDRESS 2628 BRANDYWINE DR
CITY - ST - ZIP CLEARWATER, FL 00000

TITLE DT
NAME OBIE, MICHAEL R.
STREET ADDRESS 13120 4TH STREET E
CITY - ST - ZIP MADERIA BEACH FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

Robert W. ZASIMOVITCH
President

7-1-95

813 785-5095

DATE

Signature