

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 16, 2005 8:00 am**  
**Secretary of State**

02-16-2005 90043 003 \*\*\*150.00

**DOCUMENT # 495385**

1. Entity Name

INTER-CITY EXTERMINATORS, INC.



Principal Place of Business

1120 SW 134 PL  
MIAMI FL 33184  
US

Mailing Address

1120 SW 134 PL  
MIAMI FL 33184  
US

50016248



1st MOORE

CR2E034 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1668813

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RODRIGUEZ, EMILIO  
1120 SW 134 PL  
MIAMI FL 33184

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ~~STD~~ ☒ Delete  
NAME RODRIGUEZ, JOSE  
STREET ADDRESS ~~1203 COLUMBUS BLVD~~  
CITY-ST-ZIP ~~CORAL SPRINGS FL 33134~~

TITLE ☒ Change ☐ Addition  
NAME RODRIGUEZ JOSE S  
STREET ADDRESS 1120 SW 134 PL  
CITY-ST-ZIP MIAMI FL 33184

TITLE ~~PD~~ ☒ Delete  
NAME ~~MONTORO, DULCE D~~  
STREET ADDRESS ~~46 SW 88 AVE RD~~  
CITY-ST-ZIP ~~MIAMI FL 33184~~

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ~~STD~~ ☐ Delete  
NAME ~~MONTORO, DULCE D~~  
STREET ADDRESS 1120 SW 134 PL  
CITY-ST-ZIP MIAMI FL 33184

TITLE ☒ Change ☐ Addition  
NAME MONTORO, DULCE D  
STREET ADDRESS 1120 SW 134 PL  
CITY-ST-ZIP MIAMI FL 33184

TITLE PD ☐ Delete  
NAME RODRIGUEZ, EMILIO  
STREET ADDRESS 1120 SW 134 PL  
CITY-ST-ZIP MIAMI FL 33184

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

EMILIO RODRIGUEZ

2/9/05 225-5051