FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY -1 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 590797 (7)

1. Corporate Name
PETRI'S POSITIVE PEST CONTROL OF PALM BEACH COUN TY, INC.

Principal Office
737 SW 9TH TERR
POMPANO BEACH FL 33069-4521

Mailing Address
737 SW 9TH TERR
POMPANO BEACH FL 33069-4521

3. Date Incorporated or Qualified: 10/23/1978
3a. Date of Last Report: 04/26/1994

2. Principal Place of Business
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24 25

2a. Mailing Address
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29 30

4. FEI Number: 59-1873546 — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

8. Is organization a small business under Section 288.703, Florida Statutes? [✓] Yes [ ] No

9. Name and Address of Current Registered Agent
PETRI, HENRY C.
737 SW 9 TERR
POMPANO BEACH, FL FL 33060

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, Florida Statutes, the undersigned 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 resolution of its board of directors or by action of the appointment as registered agent. I am familiar with the obligations of a registered agent under Florida Statutes.

SIGNATURE

12. OFFICERS AND/OR DIRECTORS

TITLE	COB
NAME	PETRI, HENRY C.
STREET ADDRESS	737 S.W. 9TH TERRACE
CITY, ST, ZIP	POMPANO BEACH FL
TITLE	S
NAME	PETRI, RUTH M.
STREET ADDRESS	737 S.W. 9TH TERRACE
CITY, ST, ZIP	POMPANO BEACH FL
TITLE	P
NAME	CAVANAGH, BRENDEN
STREET ADDRESS	737 S.W. 9TH TERRACE
CITY, ST, ZIP	POMPANO BEACH FL

13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS
[ ] Change [ ] Addition

14. 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 force and 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 Florida Statutes; and that my name appears above, or on an attachment with an asterisk.

SIGNATURE: R M Petri — 4/27/95 — 305-781-4100

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR
R.M. PETRI

0112204 CP