

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

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**Jan 14 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 669577 (9)

1. Corporation Name
ACME PESTMASTERS CORP.



Principal Place of Business: **P O BOX 17083 PLANTATION FL 33318**
Mailing Address: **P O BOX 17083 PLANTATION FL 33318-7083**

3. Date Incorporated or Qualified: **05/09/1980**
3a. Date of Last Report: **01/25/1996**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-1995906	Not Applicable
Suite, Apt #, etc.	Suite, Apt #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
23	28		
Zip	Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
24	29		
Country	Country		
25	30		

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MERVYN, H RICKMAN 1368 NW 103RD LANE CORAL SPRINGS FL 33071	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	85 Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P RICKMAN, MERVYN H	1.2 NAME	Rickman, Mervyn H
STREET ADDRESS	10779 NW 19TH DR	1.3 STREET ADDRESS	1368 N.W. 103rd Lane
CITY-ST-ZIP	CORAL SPGS FL	1.4 CITY-ST-ZIP	Coral Springs, FL 33071
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S RICKMAN, LORRAINE	2.2 NAME	Rickman, Lorraine
STREET ADDRESS	10779 NW 19TH DR	2.3 STREET ADDRESS	1368 N.W. 103rd Lane
CITY-ST-ZIP	CORAL SPGS FL	2.4 CITY-ST-ZIP	Coral Springs, FL 33071
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE: *Mervyn H. Rickman* 1/8/96 561-392-2227
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)