


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

FILED

Jan 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F95000002549 (2) 1. Corporation Name PESTMASTER SERVICES, INC.					
Principal Place of Business 137 EAST SOUTH STREET BISHOP CA 93514			Mailing Address 137 EAST SOUTH STREET BISHOP CA 93514		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/25/1995	
21		26		4. FEI Number 95-3718404	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23		28		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24	Zip	25	Country	29	Zip
9. Name and Address of Current Registered Agent HANSON, FRANCES 5055-1 ST. AUGUSTINE ROAD JACKSONVILLE FL 32207			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 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PC	<input type="checkbox"/> DELETE			
NAME	VAN DIEPEN, JEFFREY M				
STREET ADDRESS	137 EAST SOUTH STREET				
CITY - ST - ZIP	BISHOP CA 93514				
TITLE	VD	<input type="checkbox"/> DELETE			
NAME	PFERSICH, LILLIAN				
STREET ADDRESS	6360 CORY STREET				
CITY - ST - ZIP	SIMI VALLEY CA 93063				
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY - ST - ZIP					



DO NOT WRITE IN THIS SPACE

SIGNATURE:

Jeffrey M. Van Diepen

1/5/98 (760) 873-8100

CR2E034 (10/97)