


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 28, 2008 08:00 A
Secretary of State

DOCUMENT # G11134 1. Entity Name MODEL PEST CONTROL, INC.		
Principal Place of Business 19155 SW 208 ST MIAMI, FL 33187 US		Mailing Address 24305 SW 199 AVE HOMESTEAD, FL 33031 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent WHITEHOUSE, WILLIAM J. 24305 SW 199 AVE. MIAMI, FL 33031		DO NOT WRITE IN THIS SPACE
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE	SDV	
NAME	WHITEHOUSE, DIANN A	
STREET ADDRESS	24305 S.W. 199TH AVE.	
CITY-ST-ZIP	MIAMI, FL 33031	
TITLE	DP	
NAME	WHITEHOUSE, WILLIAM	
STREET ADDRESS	24305 S.W. 199TH AVE.	
CITY-ST-ZIP	MIAMI, FL 33031	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Diann A. Whitehouse</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>1-24-08 305238-1707</u> <small>Date Daytime Phone #</small>



01242008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2235721	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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01/31/08-80028-012 150.00