FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1996

(1) H30756

1. Corporation Name

RELIABLE EXTERMINATING COMPANY									
Principal Place o	f Business	Mailing Address				-		#1#14 #1811 FBB1	
137 N.E. 2ND A	AVENUE	137 N.E. 2ND AVENUE DEERFIELD BCH. FL 33441							
			u - a			3. Date Incorporated or Qualified 11/20/1984	3a. Date of Last I 05/01/19	95	
2. Principal Plac	ce of Business	2a. Mailing Address 26				4. FEI Number 59-2508598		Applied For Not Applicable	
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees	
Zip	Country	Zip	Coun	try		8. This corporation has liability for in		s 199.032,	
4	25	29 Peolstered Agent	[30]			Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	9, Name and Address of Current	เ บะกิเจเลเลก ฟฏิลแก		81	Name	IV. Harris and Address of Harris			
AMICI, LIS	SA.					iss (P.O. Box Number is Not Acceptable	e)		
137 N.E.	SECOND AVENUE				Oliect Addle	ruless (.o. box (o.			
DEERFIELD BEACH FL 33441				В3					
]	84	City		FL I''I	Zip Code	
OLONIA TURE:	id agent, or both, in the State of Floric n, and accept the obligations of, Secti signature, typed or parted name of registered agent.				oration's board	ation submits this statement for the purp d of directors. I hereby accept the appo	intment as registere	ed agent. I am	
12.	Signature, typed or printed name of registered agont OFFICERS AND		13.	egro-1i	. Ser Grant technico	ADDITIONS/CHANGES TO OFFI			
TITLE	PD	DELETE		1. 1 TITLE			☐ Chang	e Addition	
NAME	RAGONESE, NICHOLAS		1.2 NAME						
STREET ADDRESS	137 N.E. SECOND AVENUE			13 STREET ADDRESS					
CITY-ST-ZIP TITLE	DEERFIELD BCH FL			1.4 CITY- ST-ZIP 2. 1 TITLE			Chang	e Addition	
NAME	AMICI, LISA	Luj	2.2 NAME						
STREET ADDRESS	137 N.E. SECOND AVENUE		2.3 ST	2.3 STREET ADDRESS					
CITY-ST-ZIP	DEERFIELD BCH FL		2 4 CITY - ST - Z/P		1 - ZiP			e Addition	
TITLE	D DELETE		3 1 1/					e Nodieou	
NAME OTRECT ADDRESS	RAGONESE, ANTHONY 736 N.E. GLOUCHESTER ST.		3.2 NAME 3.3. STHEET ADDRESS		ADDRESS				
STREET ADDRESS CHY-ST-ZIP	BOCA RATON FL		3.4 CITY - \$1 - ZIP						
TITLE	PANTERINITE			4. 1 TITLE			Chang	e 🔲 Addition	
NAME			4 2 NA	MÊ					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				4.4 GITY - ST - ZIP 5 1 TITLE			Chang	e Addition	
HILF		[] btrrit	5 1 H						
NAME CARELL ADDRESS					ADDRESS				
STREET ADDRESS			1		Ì				
CITY-S1-ZIP TITLE				5.4 CHY-ST-ZIF 6 1 TITLE			Chang	ge 🔲 Addition	
NAME		-	62 N/	AME					
STREET ADDRESS			6 3 ST	REET	ADDRESS				
CITY-ST-ZIP			6.4 CI	TY-S	SI - ZIF		07/0/#A Et :: : : : :	tutos (f. dho:	
14. I do hereb certify that oath; that appears in	y certify that the information supplied the information indicated on this ann Lam an officer or director of the corp in Block 12 or Block 13 if changed, or	with this filing is voluntarily fu ual report or supplemental ar oral on or the esteiver or tribs on avalattachines with as ad	imished and mual report i tee empower dress	doc s tru red	is not quality f ue and accura to execute thi	or the exemption stated in Section 119 ate and that my signature shall have the is report as required by Chapter 607, Fi	same legal effect a orida Statutes; and	is if made under that my name	

SIGNATURE:

NING OFFICER OF DIRECTOR

4/26/96 (954) 427-4200

CR2E034 (12/95)