

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

FILED

Apr 15 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H80917** (8)

1. Corporation Name  
**FAMILY PEST CONTROL, INC.**

Principal Place of Business <b>7461 NW 42ND COURT LAUDERHILL FL 33319 US</b>	Mailing Address <b>7461 NW 42ND COURT LAUDERHILL FL 33319-3927 US</b>
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2. Principal Place of Business 21 <b>4384 Hunting Trail</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>4384 Hunting Trail</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>10/07/1985</b>	3a. Date of Last Report <b>03/01/1996</b>
22 City & State 23 <b>Lake Worth, FL</b>		27 City & State 28 <b>Lake Worth, FL</b>		4. FEI Number <b>59-2635419</b>	Applied For Not Applicable
24 Zip <b>33467</b>		25 Country <b>Palm Beh</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
29 Zip <b>33467</b>		30 Country <b>Palm Beh</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
9. Name and Address of Current Registered Agent <b>DRAGO, ROBERT 7461 N.W. 42ND COURT LAUDERHILL FL 33319</b>				10. Name and Address of New Registered Agent 81 Name <b>Robert Drago</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>4384 Hunting Trail</b> 83 84 City <b>Lake Worth</b> <b>FL</b> 85 Zip Code <b>33467</b>	

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: ☒ family with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Robert Drago* DATE: **4-9-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>DP</b>	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>DRAGO, ROBERT</b>		1.2 NAME	
STREET ADDRESS <b>7461 N.W. 42ND COURT</b>		1.3 STREET ADDRESS <b>4384 Hunting Trail</b>	
CITY - ST - ZIP <b>LAUDERHILL FL</b>		1.4 CITY - ST - ZIP <b>Lake Worth, FL 33467</b>	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
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: *Robert Drago* DATE: **4-9-97** DAYTIME PHONE: **(561) 967-6967**

CR2E034 (9/96)