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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L19364

(3)

ENVIRONMENTAL PEST CONTROL, INC.

FILED	
Apr 25 1997 8:00ar	n
Secretary of State	

Principal Place of Business Mailing Address			S LOOKSON DAT 110 IA LAMAD YILKA BISKS BIBL BIBLS DIBLS DIBLS DIBLS DIBLS BIBLS					
4505 BROOK DR. W PALM BEACH FL 33417		4505 BROOK DR. W PALM BEACH FL 33417-8206						
					3. Date Incorporated or Qu 09/28/1989	alified 3	a. Date of Last 04/19/1996	
2. Principal Place of Business	2a, Mailing	Address			4. FEI Number	· · · · · · · · · · · · · · · · · · ·		Applied For
21	26				65-0160463			Vot Applicable
Suite, Apt. #, etc.	Suite,	Apt. #, etc.			5. Certificate of Status Desi	red	\$8.75	Additional
22	27				6. Continuate of Status Desi	100 L	Fee I	Required
City & State	City &	State			6. Election Campaign Finar	_		🕽 Мау Ве
23	28				Trust Fund Contribution			to Fees
├ ─, '	ountry Zip	 -	ountry	!	8. This corporation has liab			s. 199.032,
24 25	29 ddress of Current Registered A	30	. 		Florida Statutes 10. Name and Address of I	X Ye		
	todiess of Corrent Registered A	gent	81	Name	JU, Italiia alid Montaes Oli	Jan vahien	BIOU AUGUS	· · · · · · · · · · · · · · · · · · ·
BOCCIA, ANTHONY				1401110				
4505 BROOK DR.	00447		82	Street Add	lress (P.O. Box Number is Not A	cceptable)		
W PALM BEACH FL	3341/		83					
			00					
			84	City			FL 85 Zij	Code
	Sections 607.0502 and 607.1508	Clade Otation Abo						ter an all terms of
office or registered agent, or agent. I am familiar with, and	r both, in the State of Florida. Suci d accept the obligations of, Section	n change was authoriz in 607.0505, Florida St	ed by atute	the corpora s.	tion's board of directors. I hereb	y accept the	e appointment a	is registered
SIGNATURE Signature, typed or printe	id name of registered agent and title it applicat	ole (NOTE: Registe	red Ape	ent signature requ	lired when reinstating)	D.	ATE	
12.	OFFICERS AND DIRECTORS	13			ADDITIONS/CHANGES TO	OFFICERS		
TITLE DP		DELETE 1.1	TITLE				☐ Change	Addition
NAME BOCCIA, ANTI		1.2	NAME					
STREET ADDRESS 4505 BROOK	DRIVE	1.3	STREET	ADDRESS				
CITY-ST-ZIP W PALM BEAU	CH FL	1.4	CITY-5	IT-ZIP				
TITLE ST		DELETE 2.1	TITLE				Change	Addition
NAME BOCCIA, SUS	AN	2.2	NAME					
STREET ADDRESS 4505 BROOK	DRIVE	2.3	STREET	ADDRESS				
CITY-ST-ZIP WEST PALM E	BEACH FL	2. 4	CITY-:	ST-ZIP				
TITLE		DELETE 3.1	TITLE				☐ Change	Addition
NAME		3.2	NAME					
STREET ADDRESS		3.3	STREE1	ADDRESS				
CITY - ST - ZIP			CITY-	ST-ZIP				
TITLE		DELETE 4.1	TITLE				☐ Change	Addition
NAME		4.2	NAME					
STREET ADDRESS		4.3	STREET	ADDRESS				
CITY-ST-ZIP			CITY- 9	ST- 21P				
TITLE		DELETE 51	TITLE				☐ Change	Addition
NAME		52	NAME	ı				
STREET ADDRESS		5.3	STAEE	ADDRESS				
CITY-ST-7iP			CITY-S	ST-ZIP				
TITLE		DELETE 6.1	TITLE				☐ (Change	Addition
NAME		6.2	NAME					
STREET ADDRESS		6.3	STREET	ADDRESS				
CITY-ST-ZIP			CITY - S					

14. I do hereby certily 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 trusted propowered 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: