FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 09, 2001 8:00 am Secretary of State DOCUMENT # **L36219** 1. Entity Name TEMPEST PEST CONTROL, INC. 04-09-2001 90054 046 ***150.00 Principal Place of Business Mailing Address 5621 SW 162ND AVE 5621 SW 162ND AVE FT LAUDERDALE FL 33331 FT LAUDERDALE FL 33331 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0159251 Not Applicable Zip Country Country \$8.75 Additional Zip 5. Certificate of Status Desired ee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JURIGA, JAMES A Street Address (P.O. Box Number is Not Acceptable) 5621 SW 162ND AVE FT LAUDERDALE FL 33331 Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. Addition CR2E034 (10/00) Delete TITI F Change TITLE JURIGA, CONCHITA H NAME NAME STREET ADDRESS STREET ADDRESS 5621 SW 162ND AVE CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ☐ Change ☐ Addition **VTD** Delete TITLE TITLE NAME Juriga, James a NAME STREET ADDRESS STREET ADDRESS 5621 SW 162ND AVE CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL Addition ☐ Delete TITLE TITLE NAME JURIGA, MICHEAL A. NAME STREET ADDRESS STREET ADDRESS 5621 SW 162ND AVE CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ☐ Change ☐ Addition TITLE ☐ Delete NAME JURIGA, JAMES A., JR. STREET ADDRESS STREET ADDRESS 5621 SW 162ND AVE CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL **VSD** ☐ Delete Change Addition TITLE TITLE NAME JURIGA, LYNN N. STREET ADDRESS STREET ADDRESS 5621 SW 162ND AVE CITY-ST-ZIP CITY-ST-ZIP FT LAUDERDALE FL ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I 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 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 11 or Block 12 if changed, or on an attachmen with an address, with all other tile empowered.

FICER OR DIRECTOR