FILED

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

May 14, 2001 8:00 am **DOCUMENT # M15257** Secretary of State 1. Entity Name K. CUNNINGHAM EXTERMINATING, INC. 05-14-2001 90233 013 ***150.00 Principal Place of Business Mailing Address 1600 S W 52ND TERRACE 1600 S W 52ND TERRACE PLANTATION FL 33317 PLANTATION FL 33317 NOO51288 2. Principal Place of Business 5024 S.W. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For 59-2530102 DODER CITU Not Applicable BROWARD \$8.75 Additional 5. Certificate of Status Desired GROWARD Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent UNNI CUNNINGHAM, KEVIN JOHN 1600 S W 52ND TERRACE **PLANTATION FL 33317** hts this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entity subj 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 OFFICERS AND DIRECTORS 11. 12. COOPEL CITY, FL: 33330 CR2E034 (10/00) TITLE Delete NAME NAME CUNNINGHAM, KEVIN JOHN STREET ADDRESS STREET ADDRESS 3524 SW 12TH PLACE CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL-☐ Delete TITLE NNINDHAM, TAMMY LUN TITLE 5024 S.W. 12157 AVE NAME **CUNNINGHAM, TAMMY LYN** NAME STREET ADDRESS STREET ADDRESS 3524 S.W. 12TH PLACE ----> CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL---☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information symbiled 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 of 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 attachment with an address, with all other like empowered.