2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

AMENDED AN	NUAL REPOR	PAGE FILED						
DOCUMENT # M80745		PAGE 10FZ						
PRIME PEST CONTROL, INC.		07 AUG -3 PH 1: 17						
		SEGILITATION STATE TALLAHASSEE, FLORIDA						
Principal Place of Business 6300 PARK OF COMMERCE BLVD.	Mailing Address C/O CORPORATION SER	RVICES COMPANY						
BOCA RATON, FL 33487 US	1201 HAYS STREET Tallahassee, FL 323							
Principal Place of Business - No P.O. Box #	3. Mailing Address	Connerce Blvd						
Suite, Apt. #, etc.	Suite, Apt. #, etc.	04262007 Chg-P CR2E034 (12/06)						
City & State	BOCA RATON	4. FEI Number Applied For 65-0055506 Not Applicable						
Zip Country	Zip 33487	Country 5. Certificate of Status Desired Fee Required Fee Required						
6. Name and Address of Curre	int Registered Agent	7. Name and Address of New Registered Agent						
CORPORATION SERVICE COMPANY	/	NAME ANTHONY KALLICHE, ESQUIRE						
1201 HAYS STREET		Street Address (P.O. Box Number is Not Acceptable)						
TALLAHASSEE, FL 32301								
		City Hollywood FL 333020						
8. The above named entity submits this statemen	t for the purpose of changing its	registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept						
the obligations of registered agent.		, ,						
SIGNATURE Signature, typed or printed name of registered ag		E Registered Agent signature required when renstating) DATE						
agricule, typac or printed frame or registered ag	per and me in approache.	C nogranieu Ageni agriculu roqueu mian renacungi						
Amended AR is \$61.25	9. Election Campaig Trust Fund Contr							
	ND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11						
TITLE DC NAME SWATT, MYRON	Delete	NAME STRUNIN, RICHARD Change Addition						
STREET ADDRESS 6300 PARK OF COMMERCE	BLVD	I STREET ADDRESS 29 SO N . 18 ICEPTED						
CITY-\$1-ZIP BOCA RATON, FL 33487		CITY-ST-ZIP HONGOD, FL 350 20						
NAME LESTER, ANDREW	☐ Delete	TITLE VPD Demange Addition NAME LESTER, ANDREW STREET ADDRESS CONTROL BIND CITY-ST-ZIP BOCA RAFDAN FL 33487						
STREET ADDRESS 6300 PARK OF COMMERCE	BLVD	STREET ADDRESS 6300 PARKOF COMMERCE 151VA						
CITY-SI-ZIP BOCA RATON, FL 33487		10001 1011 1001						
NAME SOLLINS, CHARLES	☐ Defete	TITLE CECPS Defrange Addition						
STREET ADDRESS 6300 PARK OF COMMERCE	BLVD.	STREET ADDRESS 6300 Pank of COMMERCE BIND						
CITY-ST-ZIP BOCA RATON, FL 33487		CITY-SI-ZIP BOCA RATUN FL 33487						
INTLE D NAME PATTERSON, D. SCOTT	Detete	NAME AS FRIEDRICHSEN Change Addition						
STREET ADDRESS 1140 BAY ST STE 4000	· ·	STREET ADDRESS 1140 BAY STILEET, SUITE 400						
CITY-ST-ZIP TORONTO, ON		CITY-ST-ZIP TORONTO, ONTARIO M35 284						
ITILE VP NAME BERSTEIN, ARNOLD J	Delete Delete	NAME TOUGHTS G. COCKE Addition						
STREET ADDRESS 6300 PARK OF COMMERCE		STREET ADDRESS 1140 BAY STREET, STE 400						
CITY-ST-ZIP BOCA RATON, FL 33487		CITY-SI-ZIP TORONTO, ONTARIO MSS 284						
NAME LANG, WENDY	Defete	NAME LANG, WENDY Change Addition						
STREET ADDRESS 6300 PARK OF COMMERCE	BLVD	STREET ADDRESS 6 300 PAICH OF COMMERCE 1310						
CITY-SI-ZIP BOCA RATON, FL 33487		CITY-ST-ZIP DUCA KATION, I'L JJU						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other temps wered.								
SIGNATURE: 8/2/07 561-989.5071								

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

AMENDED ANNUAL REPORT .										
DOCUMENT # M80745						PAGE	2	OF 3	2_	
1. Entity Name					<					
PRIMEP	EST CONTROL, INC.				į					
Principal Plac	e of Business	Mailing Address		 -	1					
6300 PARK OF COMMERCE BLVD. C/O CORPORATION SERVICES			RVICES C	OMPANY						
BOCA RATON	I, FL 33487 US		1201 HAYS STREET TALLAHASSEE, FL 32301 US		1 (50(80)) 101 (BIBIC PISS 61613	. B. S. J. B. B. J. B. G.		
2. Principal Place of Business - No P.O. Box # 3. Mailing Address										
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.		***************************************		04262007	Chg-P	CR2E03	4 (12/06)		
City & State City & State				4. FEI Number 65-0055	506			pplied For		
Zip	Country	Zip Coun		try	<u> </u>	f Status Desired		8.75 Add	litional	
	6. Name and Address of Current F	Registered Agent			7. Name and Address of New Registered Agent					
	***************************************			Name ANTHONY KALLICHE, ESQUIRE						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301				Street Address (P.O. Box Number is Not Acceptable)						
IALLAHA	33EE, FL 32301			Hollywoop						
				City		THE PLANTS OF THE PARTY OF THE	FL	Zip Code	020	
8. The above	named entity submits this statement for ions of registered agent.	the purpose of changing its	registere	ed office or register	red agent, or both	, in the State of Flo	rida. I am fa	miliar with,		
the obligati	ions diregiste ed agent.					6	1-	07		
SIGNATURE_	Signature, types or printed name of registered agent at	nd title if applicable. (NOT	E Registered	Agent signature required	1 when reinstating)		DATE	07		
9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees										
10.	OFFICERS AND D	DIRECTORS	11.			HANGES TO OFFI	ICERS AND I	DIRECTORS	S IN 11	
TITLE NAME	DC SWATT, MYRON		TITLE		DAGE R	osæs		Change '	Addition	
STREET ADDRESS	6300 PARK OF COMMERCE BLV		•	T ADDRESS 100	en klus in	CSES TERRA OCD, FL	tcia		•	
CITY-ST-ZIP	BOCA RATON, FL 33487	/ rnge l	CITY-	SI-ZIP	Holly Mi	OCD, FL	330	2 U_		
TITLE NAME	VP LESTER, ANDREW	☐ Delete	TITLE		ļ			☐ Change	☐ Addition	
STREET ADDRESS	6300 PARK OF COMMERCE BLV	'D		ET ADDRESS						
CITY-ST-ZIP	BOCA RATON, FL 33487		CITY-	ST-ZIP						
TITLE	CEOP SOLLINS, CHARLES	☐ Delete	TITLE					☐ Change	Addition	
NAME STREET ADDRESS	6300 PARK OF COMMERCE BLV	'D.	NAME STREE	ET ADDRESS						
CITY-ST-ZIP	BOCA RATON, FL 83467		CITY-	ST-ZIP						
TITLE	D PATTERSON, D. SCOTT	Delete	TITLE					☐ Change	☐ Addition	
NAME STREET ADDRESS	1140 BAY ST STE/4000		NAME STREE	ET ADDRESS						
CITY-ST-ZIP	TORONTO, ON			ST-ZIP						
TITLE	VP	☐ Delete	TIFLE					☐ Change	☐ Addition	
name Street address (BERSTEIN, ARNOLD J \ 6300 PARK ØF COMMERCE	\	NAME STREE	ET ADDRESS						
ÇITY-ST-ZIP	BOCA RATON, FL 33487			ST-ZIP					1	
TITLE	ST LANC MENDY	☐ Delete	TITLE					☐ Change	Addition	
NAME STREET ADDRESS	LANG, WAENDY 6300 PARK OF COMMERCE BLV	_{'D} \	NAME	ET ADDRESS						
CITY-ST-ZIP	BOCA RATON, FL 33487		CITY-	ST-ZIP						
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate any but 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 the proport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.										
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAL OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAL OFFICER OR DIRECTOR Date Date										