

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**May 11, 2001 8:00 am**  
**Secretary of State**

05-11-2001 90100 020 \*\*\*150.00

**DOCUMENT # P00000013444**

1. Entity Name  
**A & R PEST CONTROL INC.**

Principal Place of Business

**3339 RONALD STREET  
DELTONA FL 32738**

Mailing Address

**3339 RONALD STREET  
DELTONA FL 32738**

2. Principal Place of Business

**1400 S. Delaney Ave.**  
Suite, Apt. #, etc.

3. Mailing Address

**PO Box 721063**  
Suite, Apt. #, etc.

City & State

**Orlando, FL**

City & State

**ORLANDO, FL**

4. FEI Number

**59-3623942**

Applied For

Not Applicable

Zip

**32806**

Country

**USA**

Zip

**32872-1063**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**GARCIA, ANGEL  
3339 RONALD STREET  
DELTONA FL 32738**

7. Name and Address of New Registered Agent

Name

**RANDALL ENGAR**

Street Address (P.O. Box Number is Not Acceptable)

**1400 Delaney Avenue South**

City

**Orlando**

**FL**

Zip Code

**32806**

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

**Randall Engar - RANDALL ENGAR**

**4-26-2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PRESIDENT** ☐ Delete  
NAME **RANDALL ENGAR**  
STREET ADDRESS **1400 Delaney Avenue South**  
CITY-ST-ZIP **Orlando, FL 32806**

TITLE **VICE-PRESIDENT** ☐ Delete  
NAME **GARY MARTIN**  
STREET ADDRESS **4750 ROSEWOOD DR.**  
CITY-ST-ZIP **ORLANDO, FL 32806**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 attachment with an address, with all other like empowered.

SIGNATURE: **Randall Engar RANDALL ENGAR**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-26-2001**

Date

**407-426-8121**

Daytime Phone #

CR2E034 (10/00)