

01/02 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000053469

1. Entity Name

NEOGUARD PEST ELIMINATION SERVICES, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3816 BECONTREE PLACE

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 621179

Suite, Apt. #, etc.

City & State

OVIEDO, FL

City & State

OVIEDO, FL

Zip

32765

Country

USA

Zip

32762

Country

USA

DO NOT WRITE IN THIS SPACE

05-18-01 91594 013 \$150.00

4. FEI Number

59-3652512

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

WILLIAM P. McGRATH

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

3816 BECONTREE PLACE

City

OVIEDO

FL

Zip Code

32765

DO NOT WRITE IN THIS SPACE

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 re-electing)

DATE

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

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME
STREET ADDRESS
CITY - ST - ZIP
PRESIDENT
WILLIAM P. McGRATH
3816 BECONTREE PLACE
OVIEDO, FL 32765

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

100005080921--8
-03/11/02-01061--027
***150.00 ***150.00

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VICE PRESIDENT
SCOTT RUBERTO
340 LYNN STREET
OVIEDO, FL 32765

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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[Signature]

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM P. McGRATH, PRES. 2/20/02 (407) 971-7810
Date Daytime Phone

FILE
OFFICE OF THE
CLERK OF THE
STATE OF FLORIDA
02 MAR -1 A

02 MAR -1 AM 9:05

CR2E034B (12/01)

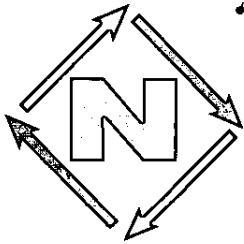
We greatly appreciate your consideration and attention to this matter. If you have any questions, please feel free to contact me.

Sincerely,

A handwritten signature in cursive script, appearing to read "Bill McGrath".

Bill McGrath
President

Encs.



NEOGUARD

PEST ELIMINATION SERVICES, INC.

February 20, 2002

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Neoguard Pest Elimination Services, Inc.
EIN: 59-3652512

Dear Sir or Madam:

It came to our attention yesterday as we were searching your website to download the 2002 Uniform Business Report (UBR) that our corporation was administratively dissolved on 9/21/01 for the annual report. We were unaware that this had occurred until now as we received no prior notices from your office.

Upon discovery of this issue, we contacted your office this morning and learned from one of your representatives that the 2001 UBR and payment had been received timely by your office, and the check for \$150.00 was credited to our account. The representative told us that a rejection letter was subsequently mailed to the address as shown on the annual report (P.O. Box 621179, Oviedo, FL 32762-1179). This is the correct mailing address, however, unfortunately, we never received the rejection letter delivered to this address.

The representative informed us that the rejection letter requested that Box 4 on the UBR be complete with our federal employer identification number. If we would have received your notice, we would have promptly corrected the error. The 2001 UBR was the first report we were required to file with your office. We apologize for the error, but we were unaware of it.

We also did not receive a preprinted 2002 UBR to file. Therefore, we have printed one from your website and have enclosed the completed form with a check in the amount of \$150. We respectfully request that you please update our account to reflect the federal employer identification number as referenced above and shown on the 2002 UBR. We also request that our corporation be reinstated and that any penalties related to the dissolution be removed from our account as we were unaware of the rejection letter.