2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 04, 2004 8:00 am **Secretary of State** DOCUMENT # P03000017853 02-04-2004 90073 035 ***158.75 AAA TERMITE SPECIALIST, INC. Principal Place of Business Mailing Address 134 NORTH MOON AVENUE ... BRANDON FL 33510 134 NORTH MOON AVENUE BRANDON FL 33510 2. Principal Place of Business 3. Mailing Address 706 Easy Living Trail SAME Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For Seffner, FL 25-1903381 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 33584 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent David E. Young YOUNG, DAVID E Street Address (P.O. Box Number is Not Acceptable) 134 NORTH MOON AVENUE BRANDON FL 33510 706 Easy Living Trail Zip Code 4 Seffner 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. I am familiar with, and accept the obligations of registered agent. 01/30/2004 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TID F ☐ Delete TITLE Change Addition President NAME David E. Young NAME STREET ADDRESS 706 Easy Living Trail Seffner, FL 33584 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Vice President TITLE TITLE Change ☐ Addition Justin E. Young 706 Easy Living Trail NAME NAME STREET ADDRESS STREET ADDRESS Seffner, FL33584 CITY-ST-ZIP CITY-ST-ZIP TITLE Secretary, Trea. Brenda Young ☐ Delete TITLE ☐ Change ■ Addition NAME---STREET ADDRESS 706 Easy Living Trail STREET ADDRESS Seffner, FL 33584 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition 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 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

SIGNATURE: David E. Young 01/31/2004 (8/3) 661-6399