2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2004 8:00 am Secretary of State

1. Entity Name	MENT # P0300003 ED PEST CONTROL SYS					04-30-20	004 90336 030	130.00
Principal Place of Business 6398 DANNER DR STE D SARASOTA, FL 34240		Mailing Address 6398 DANNER DR STE D SARASOTA, FL 34240						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01302004	Chg-P	CR2E034 (10/0	3)	
City & State		City & State		4. FEI Number	4244	344	Applied For Not Applicable	
Zip	Country	Zip Cou		ntry	5. Certificate of		□ \$8.75 / Fee Requ	Additional
	6. Name and Address of Curr	ent Registered Agent			7. Name and A	ddress of New R	egistered Agent	
OII DEDOT	EIN DAVID M			Name				
SILBERSTEIN, DAVID M 720 S ORANGE AVE SARASOTA, FL 34236			-	Street Address (P.O. Box Number is Not Acceptable)				
				City			FL Zip C	ode
8. The above the obligati	named entity submits this statement ions of registered agent.	nt for the purpose of changing it	ts register	red office or registe	red agent, or both,	, in the State of Flo	orida. I am familiar w	ith, and accept
SIGNATURE_	Signature, typed or printed name of registered a	agent and title if applicable. (NC)TE: Registere	ed Agent signature require	d when reinstating)		DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$55			. 🔲 Ādo	.00 May Be ded to Fees			
10.	OFFICERS A	AND DIRECTORS	11.	410	ADDITIONS/C	HANGES TO OFF	ICERS AND DIRECT	ORS IN 11
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of the corporation or supplemental report is indeed and accurate arrollmat my signature shall have the same legal effect as it 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-arrattachment with an address, with all other like empowered.

SIGNATURE: