## 2004 FOR PROFIT CORPORATION

SIGNATURE:

## **FILED** ANNUAL REPORT (AR) Apr 26, 2004 8:00 am Secretary of State DOCUMENT # P03000061460 1. Entity Name 04-26-2004 90437 021 \*\*\*158.75 BOYNTON BEACH PEST CONTROL, INC. Mailing Address Principal Place of Business 1100 S FEDERAL HIGHWAY BOYNTON BEACH FL 33435 1100 S FEDERAL HIGHWAY **BOYNTON BEACH FL 33435** 2. Principal Place of Business 3. Mailing Address 124 Buttonwood 124 Butterwood Lane CR2E034 (11/03) City & State City & State 4. FEI,Number Applied For Beach Bounter Not Applicable 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LEVY, STEPHEN J Street Address (P.O. Box Number is Not Acceptable) 1100 S FEDERAL HIGHWAY **BOYNTON BEACH FL 33435** 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 (NOTE: Registered Agent signature required when reinstating) 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE ☐ €ttange ☐ Addition LEVY, STEPHEN J Levy, Stephen J NAME NAME Buttonwood kne 1100 S FEDERAL HIGHWAY STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33435** CITY - ST - 7IP oten Beach, FL CITY-ST-7IP TITLE Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete THILE Change ☐ Addition NAME 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 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.

5 Len, Pres. 4/20/04 (561) 733-1234