

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000026503

**FILED**  
**Feb 19, 2011**  
**Secretary of State**

**Entity Name:** ALL STAR PEST CONTROL CORP

**Current Principal Place of Business:**

11321 WEST FLAGLER ST  
MIAMI, FL 33174

**New Principal Place of Business:**

**Current Mailing Address:**

11321 WEST FLAGLER ST  
MIAMI, FL 33174

**New Mailing Address:**

**FEI Number:** 20-2379047

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ARCAS, LISSETTE  
5102 SW 137 CT  
MIAMI, FL 33175 US

**Name and Address of New Registered Agent:**

ARCAS, RAMON  
11321 WEST FLAGLER ST  
MIAMI, FL 33174 US

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:** RAMON ARCAS

02/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PS  
**Name:** ARCAS, RAMON  
**Address:** 14472 SW 50 TERRA  
**City-St-Zip:** MIAMI, FL 33175

**Title:** VT  
**Name:** ARCAS, LISSETTE  
**Address:** 5102 SW 137 CT  
**City-St-Zip:** MIAMI, FL 33175

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** RAMON ARCAS

PS

02/19/2011

Electronic Signature of Signing Officer or Director

Date