

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000152008

Entity Name: COMBAT PEST CONTROL, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1830 S.W. 42 AVENUE
FORT LAUDERDALE, FL 33317

New Principal Place of Business:

420 SW 71 AVENUE
PEMBROKE PINES, FL 33023

Current Mailing Address:

1830 S.W. 42 AVENUE
FORT LAUDERDALE, FL 33317

New Mailing Address:

PO BOX 5294
HOLLYWOOD, FL 330835294 US

FEI Number: 20-3775637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CZERNIAWSKI, CAMILLA L
1830 SW 42 AVENUE
FORT LAUDERDALE, FL 33317 US

Name and Address of New Registered Agent:

CZERNIAWSKI, CAMILLA L
420 SW 71 AVENUE
PEMBROKE PINES, FL 33023 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:

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CZERNIAWSKI, ANDREW J
Address: 1830 SW 42 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33317

Title: VP () Delete
Name: CZERNIAWSKI, CAMILLA L
Address: 1830 SW 42 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CZERNIAWSKI, ANDREW J
Address: 420 SW 71 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33023

Title: VP (X) Change () Addition
Name: CZERNIAWSKI, CAMILLA L
Address: 420 SW 71 AVENUE
City-St-Zip: PEMBROKE PINES, FL 33023

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CAMILLA L CZERNIAWSKI

VP

04/29/2009

Electronic Signature of Signing Officer or Director

Date