

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000109757

FILED  
May 18, 2010  
Secretary of State

**Entity Name:** SHEPARD'S PEST SOLUTIONS, INC.

**Current Principal Place of Business:**

46 SW 1ST AVENUE  
DANIA BEACH, FL 33004 US

**New Principal Place of Business:**

**Current Mailing Address:**

1106 N 30TH RD  
HOLLYWOOD, FL 33021 US

**New Mailing Address:**

2710 SCOTT ST  
HOLLYWOOD, FL 33020 US

**FEI Number:** 20-5422033

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHEPARD, STEVEN S  
1106 N 30TH RD  
HOLLYWOOD, FL 33021 US

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

SHEPARD, STEVEN S  
2710 SCOTT ST  
HOLLYWOOD, FL 33020 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:**

05/18/2010

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SHEPARD, STEVEN S  
Address: 2710 SCOTT ST  
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: VP  
Name: ARANGURI, ROGER A  
Address: 180 NE 12 AVE # 10B  
City-St-Zip: HALLANDALE, FL 33009 US

Title: TS  
Name: SHEPARD, MILAGROS Y  
Address: 2710 SCOTT ST  
City-St-Zip: HOLLYWOOD, FL 33020

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:** MILAGROS SHEPARD

TS

05/18/2010

Electronic Signature of Signing Officer or Director

Date