FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnani Secretary of State

DIVISION OF CORPORATIONS

1996

P93000002749 (8)

DOCUMENT # PESTOLINK, INC.

Principal Place of Business Mailing Address 710 PALM POINT % WILLIAMS. KRAMER. D 567 ELKCAM CIRCLE GOODLAND FL 33933 MARCO ISLAND FL 33937 3. Date incorporated or Qualified

2. Principat Place of Business			2a. 950 AN essCollier Blvd		4. FEI Number 65-0382486		Applied For	
Suite. Apt. #, etc			26 Stite##301 27			5. Certificate of Status Desired	Not Applicable \$8.75 Additional Fee Required	
23	City & State	28	Marco Isla	nd,	FL	6. Election Campaign Financing Trust Fund Contribution	-	5.00 May Be dded to Fees
4	Zip Country 25	29	33937	Οσι 30	"USA	8. This corporation has liability for intangib Florida Statutes ☐ Yes ☐ N	io	
Name and Address of Current Registered Agent						10. Name and Address of New Registe Change	red Agent	

KRAMER, WILLIAM D **567 ELKCAM CIRCLE** MARCO ISLAND FL 33937

		10. Name and Address of New Registered Agent										
*	81	Name	МО	Change	3						•	
	82	Street #		ite#3			i.	 •	7.7	· ·		-
	83			O N. Corco Is.		r Blvd			3	393	37	-
	84	City					FL	85	Zip	Code		_

01/08/1993

3a. Date of Last Report 03/20/1995

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Flonda Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florid. Such change was authorized by the corporation's bow 19 1 am I point Real members intend as registered of familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Square type to a posted manual despetancial opinion and three trapid with a 2001 C. Responsive Agent's sport in contract of the Cont							
12.	OFFICERS AND D		I 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	Р	DELETE	1.11(.)	Change Addition			
NAME	NADOLINK, WALTER G		1.2 NAME				
STREET ADDRESS	710 PALM POINT		1.3 STREET ADDRESS				
CITY-ST-ZIP	GOODLAND FL 33933		1.4 CHEY - SE- ZIP				
TITLE	T	DELETE	2.1301.8	Change Addition			
NAME	NADOLINK, WALTER		2.2 NAMY				
STREET ADDRESS	710 PALM POINT		2.3 STHEET ADDRESS				
CITY-ST-ZIP	GOODLAND FL 33933	,	2.4 CHY - \$1 - 7IP				
titue.	VS	[7] NET ELE	3 1 TITLE	Change Addition			
NAME	Paul, Kiersten		3.2 NAME				
STREET ADDRESS	710 PALM POINT		33 STREET ADDRESS				
City-ST-ZiP	GOODLAND FL 33933		3.4 CITY - ST - ZIP				
TITLE		DECE TE	4 1 TO E	Change . Addition			
NAME			4.2 NAMi				
STREET ADDRESS			4.3 STREET ADDRESS				
City-ST-7iP			4.4 CITY+ST_ZIP				
TITLE		☐ DELETE	5 1 THILE	Change Addition			
NAME			5.2 NAMF				
STREET ADDRESS			5 3 STREET ADORESS				
CHTY+ST-ZIP			5.4 C(TY+ST+Z)6				
TITLE		DELFTE	6 I THILE	Change Addition			
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY - ST - ZIP				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes | further certify that the information indicated on this annual report or suppliemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNING OFFICER OF DIRECTOR