

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000019763 (0)

1. Corporation Name

PRO SOLUTION PEST CONTROL, INC.



Principal Place of Business

801 NW 36 TERR
FT LAUDERDALE FL 33311

Mailing Address

801 NW 36 TERR
FT LAUDERDALE FL 33311

3. Date Incorporated or Qualified
03/12/1993

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0397509

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes



No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BEASLEY, ROSS E
801 NW 36 TERR
FT LAUDERDALE FL 33311

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida 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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the Corporation

(If the Registered Agent is a corporation, the signature of an authorized officer is required)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D BEASLEY, ROSS E
STREET ADDRESS
801 NW 36 TERR
CITY - ST - ZIP
FT LAUDERDALE FL 33311

TITLE ☐ DELETE

NAME
D BEASLEY, WILMA
STREET ADDRESS
801 NW 36 TERR
CITY - ST - ZIP
FT LAUDERDALE FL 33311

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

65 CITY - ST - ZIP

66 CITY - ST - ZIP

67 CITY - ST - ZIP

68 CITY - ST - ZIP

69 CITY - ST - ZIP

70 CITY - ST - ZIP

71 CITY - ST - ZIP

72 CITY - ST - ZIP

73 CITY - ST - ZIP

74 CITY - ST - ZIP

75 CITY - ST - ZIP

76 CITY - ST - ZIP

77 CITY - ST - ZIP

78 CITY - ST - ZIP

79 CITY - ST - ZIP

80 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. I further certify that the information indicated on this annual report or supplemental 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 trustee 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.

SIGNATURE:

Ross E. Beasley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROSS E. BEASLEY

4-30-96 (954) 792-3138

Date

Daytime Phone

CR2E034 (12/95)