## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## P94000028379 **DOCUMENT** #

1. Entity Name



**FILED** Mar 03, 2003 8:00 am § Secretary of State

| SAFEWAY TER  | MITE AND PEST                      | CONTROL CORPORA  | ATION                                  |   | 03-03-2003 90433 0                                      | 25 150.00  |  |
|--|------------------------------------|--|--|---|---|--|--|
| Principal Place of Business<br>4847 BASSWOOD<br>LAND O' LAKES FL 34639<br>US   |                                    | Mailing Address<br>P.O. BOX 320831<br>TAMPA FL 33629-283<br>US | P.O. BOX 320831<br>TAMPA FL 33629-2831 |   | <br>  | 17 <b>89</b> ) 1 <b>9108</b> 11911 11900 1911 1781 |  |
| 2. Principal Place of Business   |                                    | 3. Mailing Address   | 3. Mailing Address                     |   |   |  |  |
| Suite, Apt. #, etc.  |                                    | Suite, Apt. #, etc.  | Suite, Apt. #, etc.                    |   | ☐ CHECK HERE IF MAKING CHANGES                          |  |  |
| City & State   |                                    | City & State   | City & State                           |   | 4. FEI Number 65-0500955                                | Applied For Not Applicable                         |  |
| Zip  | Country                            | Zip  |  |   | 5. Certificate of Status Desired                        | \$8.75 Additional                                  |  |
| 6. N   | ame and Address of Cu              | rrent Registered Agent   |  |   | 7. Name and Address of New Registered                   |  |  |
| HAWS, JIMMY R<br>4722 WEST LAUREL RD.<br>TAMPA FL 33629  |                                    |  |  | Name Street Address (P.O. Box Number is Not Acceptable) |   |  |  |
| <u> </u>   |                                    |  |  | City  | FL  | Zip Code   |  |
| SIGNATURE  | Althoris State                     |  | g its registered                       | office or register                                      | ed agent, or both, in the State of Florida. I am        | familiar with, and accept                          |  |
| · · · · · · · · · · · · · · · · · · ·  | yped or printed name of registered |  | (NOTE: Registered A                    | gent signature required                                 | when reinstating) DATE                                  | · · · · · · · · · · · · · · · · · · ·              |  |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State |                                    |  |  | · · · · · · · · · · · · · · · · · · ·                   | 9. Election Campaign Financing Trust Fund Contribution. | \$5.00 May Be<br>Added to Fees                     |  |
| 0. OFFICERS AND DIRECTORS 11.  |                                    |  | 11.                                    |   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11       |  |  |
| TITLE D NAME MACAL STREET ADDRESS 4847 R   | USO, RICHARD A                     | ☐ Delete   | TITLE<br>NAME                          |   |   | ☐ Change ☐ Addition                                |  |

STREET ADDRESS CITY-ST-ZIP LAND O'LAKES FL 34639 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME MACALUSO, RICHARD A NAME STREET ADDRESS 4847 BASSWOOD STREET ADDRESS CITY-ST-ZIP LAND O'LAKES FL 34639 CITY-ST-ZIP TITLE -SD---- Delete = - . --TITLE. Change Addition NAME haws, Jimmy NAME STREET ADDRESS 4722 W LAUREL ROAD STREET ADDRESS CITY-ST-ZIP Tampa Fl 33629 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment of the an address, with all other like empowered

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

USIGNATURY AND CLANGED PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 19, 2003

attachment

80043876

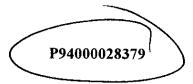
## SAFEWAY TERMITE & PEST CONTROL Inc



(813) 832-2999



P. O. Box 320831 Tampa, FL 33679-2831



January 20, 2003

Annual report

A meeting was held on January 18, 2002 at 3 PM with the shareholders.

Richard A. Macaluso was re-elected Chairman, President and Treasurer of the Corporation. Jimmy Haws was re-elected Secretary. The financial statement of the corporation for year ending 2002 was approved. There was no new business at this meeting.

The corporation does not have any intangible tax liability.

Safeway Termite and Pest Control Corporation has a date of corporation of April 12, 1994 with the State of Florida

The corporation does not want to contribute to the Election Campaign Trust Fund.

Jim Haws Secretary

Rich Macaulso, CEC