## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STAT

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000047734 (6)

MULLIGAN'S EXTERMINATING SERVICE, INC.

## FILED Apr 21 1998 8:00am Secretary of State



FT. LAUDERD	OWN ROAD SUITE 30 ALE FL 33312		4480 SW 34 DRIVE 6390 INDIANTOWN RO FT. LAUDERDALE FL 3 US			DO NOT WRITE  3. Date Incorporated or Qualified  06/22/1994  4. FEI Number	E IN THIS SPACE
2. Principal Pi 21 4480	ace of Business S. W. 34 DC		Mailing Address	347	DRIVE	65-0514788	Applied For Not Applicable
Suite Apt		27	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	AUDERBALE	28	City & State  28 FT. LAUDER DALE			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country		Zip	Countr	у	8. This corporation owes or has p	
24 3331	20	US/T 29		30 US	A	Personal Property Tax due June	
	9. Name and Addres	s of Current Reg	Istered Agent			10. Name and Address of New R	egistered Agent
	MSON, RICHARD P			8	Name		
C/O JUPITER LAW CENTER					Street Add	lress (P.O. Box Number is Not Accepte	ble)
	O INDIANTOWN ROAL	SUITE 30		8:			
JUI	PITER FL 33458			^	<b>'</b>		
				84	1,		FL 85 Zip Code
11. Pursuant to office or reagent. I as	to the provisions of Sectic egistered agent, or both, m familiar with, and acce	ons 607.0502 and in the State of Flo pt the obligations	607.1508, Florida Staterida Such change was of, Section 607.0505,	utes, the abors s authorized t Florida Statute	ve-named corpora by the corpora es.	poration submits this statement for the tion's board of directors. I hereby acception	purpose of changing its registered pt the appointment as registered
SIGNATURE							DATE
12.	Signature, typod or printed name of	registered agent and to FICERS AND DIRI		13.	gent signature requi	ired when reinstaling)  ADDITIONS/CHANGES TO OFFI	D-T-C
TRTLE	T D	I ICENS AND DIN	DELETE	1.1 TITLE		ADDITIONO/OFFICIAL TO OFFI	Change Addition
NAME	MULLIGAN, WILLIA	M J		1.2 NAME	.		·
STREET ADDRESS	4480 SW 34 DRIVE				ET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE F			1.4 CITY-			
TITLE	D		DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	MULLIGAN, VALARI	IE A		2.2 NAME	<u> </u>		
STREET ADORESS	4480 SW 34 DRIVE				ET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE F	L 33312		2. 4 CITY			
TITLE			DELETE	3.1 TITLE			Change Addition
NAME				3.2 NAME	:		
STREET ADORESS				3.3 STAE	ET ADDRESS		
CITY - ST - ZIP				3.4. CITY	-ST-ZIP		
TITLE			DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME				4. 2 NAM	E		
STREET ADDRESS				4.3 STRE	ET ADDRESS		
CITY-ST-ZiP				4.4 CITY	-ST-ZIP		
TATLE			DELETE	5.1 TITLE	•		Change Addition
NAME				5.2 NAM	<b>:</b>		
STREET ADDRESS				5.3 STRE	ET ADDRESS		
CITY+ST-ZIP				5.4 CITY			
TITLE			☐ DELETE	6.1 TITLE			Change  Addition
NAME				6.2 NAM	E		
STREET ADURESS			• .	6.3 STRE	et address		
CITY - S1 - ZIP				6.4 CITY	-ST-ZIP		A.F. (1)
14. Thereby of	certify that the information	supplied with this	s filing does not qualify	y for the exern	iption stated in	Section 119.07(3)(i), Florida Statutes.	Turtner 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: 4 John Marie Marie

14/98 954-981-5659