

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000062647

FILED
Apr 29, 2009
Secretary of State

Entity Name: ALL FLORIDA INSPECTIONS & EXTERMINATING, INC.

Current Principal Place of Business:

5055 N.W. 96TH DRIVE
CORAL SPRINGS, FL 33076 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 442
CORAL SPRINGS, FL 33067

New Mailing Address:

10693 WILES ROAD
NO. 176
CORAL SPRINGS, FL 33076

FEI Number: 65-0525224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EBANKS, HUGH
5055 N.W. 96TH DRIVE
CORAL SPRINGS, FL 33076 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: EBANKS, HUGH
Address: 5055 N.W. 96TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: OMGR () Delete
Name: EBANKS, AUDREY
Address: 5055 N.W. 96TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: AUDREY EBANKS

OMG

04/29/2009

Electronic Signature of Signing Officer or Director

Date