

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Apr 28 1997 8:00am
Secretary of State

DOCUMENT # P95000038885 (6)

1. Corporation Name

BOYNTON BEACH TERMITE & PEST CONTROL, INC.



Principal Place of Business

410 E BOYNTON BEACH BLVD
UNIT B
BOYNTON BEACH FL 33435
US

Mailing Address

410 E BOYNTON BEACH BLVD
UNIT B
BOYNTON BEACH FL 33435-3844
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

05/15/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0586570

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing

☐ \$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

~~PASTOR, HENRY T.~~
~~3904 DORRIT AVE~~
~~BOYNTON BEACH FL 33438~~

81 Name

Lenny Malusky

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

410 E. Boynton Beach Blvd.,
Unit B

83 City

Boynton Beach

85 FL

Zip Code 33435

11. Pursuant to the provisions of Sections 607.0502 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

Lenny Malusky Lenny Malusky

4/19/97

(Signature, typed printed name of registered agent, and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE

NAME ~~PASTOR, JENNY T.~~
STREET ADDRESS ~~3904 DORRIT AVE~~
CITY-ST-ZIP ~~BOYNTON BEACH FL~~

TITLE ☒ DELETE

NAME ~~MCCELLAIN, ROCKY L.~~
STREET ADDRESS ~~7400 ASHLEY SHORES CIR~~
CITY-ST-ZIP ~~LAKE WORTH FL~~

TITLE ☒ DELETE

NAME ~~PASTOR, KIMBERLY A.~~
STREET ADDRESS ~~3904 DORRIT AVE~~
CITY-ST-ZIP ~~BOYNTON BEACH FL~~

TITLE ☒ DELETE

NAME ~~SCHLANDER, SCOTT~~
STREET ADDRESS ~~8624 BRIAN BLVD~~
CITY-ST-ZIP ~~BOYNTON BEACH FL~~

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

~~Malusky~~ Pres. - Dir

Malusky, Lenny

410 E. Boynton Beach Blvd., Unit B

Boynton Beach, FL 33435

VP, Sec, Treas. - Dir

Pastor, Henry

410 E. Boynton Beach Blvd., Unit B

Boynton Beach, FL 33435

14. I do hereby certify that the information supplied with this filing does not qualify for exemption stated in Section 119.07(3)(i), 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.