


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

FILED

Apr 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000064373 (0)**

1. Corporation Name

**APEX TERMITE AND PEST CONTROL, INC.**

Principal Place of Business

**9500 SW 191 TERR  
MIAMI FL 33157**

Mailing Address

**9500 SW 191 TERR  
MIAMI FL 33157**



DO NOT WRITE IN THIS SPACE

<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>	
<b>21</b>	<b>12990 S.W. 132 AVE</b>	<b>26</b>	<b>12990 SW 132 AVE</b>
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
<b>22</b>		<b>27</b>	
City & State		City & State	
<b>23</b>	<b>MIAMI, FLORIDA</b>	<b>28</b>	<b>MIAMI, FLORIDA</b>
Zip	Country	Zip	Country
<b>24</b>	<b>33186</b>	<b>29</b>	<b>33186</b>
<b>25</b>	<b>USA</b>	<b>30</b>	<b>USA</b>

<b>3. Date Incorporated or Qualified</b> <b>08/21/1995</b>	
<b>4. FEI Number</b> <b>65-0602789</b>	Applied For <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
<b>6. Election Campaign Financing</b> Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
<b>8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**

**HERNANDEZ, RICHARD  
9500 SW 191 TERR  
MIAMI FL 33157**

**10. Name and Address of New Registered Agent**

<b>81</b>	Name
<b>82</b>	Street Address (P.O. Box Number is Not Acceptable) <b>12990 S.W. 132 AVENUE</b>
<b>83</b>	
<b>84</b>	City <b>MIAMI</b> <b>FL</b> <b>85</b> Zip Code <b>33186</b>

**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

*[Signature]*  
Signature, typed or printed name of registered agent, if applicable

(NOTE: Registered Agent signature required when reinstating)

**10 APR 1998**  
DATE

<b>12. OFFICERS AND DIRECTORS</b>		<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>	
TITLE	<b>P</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HERNANDEZ, RICHARD</b>	1.2 NAME	<b>12990 S.W. 132 AVENUE</b>
STREET ADDRESS	<b>9500 SW 191 TERR</b>	1.3 STREET ADDRESS	<b>MIAMI, FL 33186</b>
CITY-ST-ZIP	<b>MIAMI FL</b>	1.4 CITY-ST-ZIP	
TITLE	<b>VST</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CAMPBELL, CAROLYN</b>	2.2 NAME	<b>12990 S.W. 132 AVENUE</b>
STREET ADDRESS	<b>9500 SW 191 TERR</b>	2.3 STREET ADDRESS	<b>MIAMI, FL 33186</b>
CITY-ST-ZIP	<b>MIAMI FL</b>	2.4 CITY-ST-ZIP	
TITLE	<b>DPC</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CAMPBELL, MICHAEL</b>	3.2 NAME	<b>12990 S.W. 132 AVENUE</b>
STREET ADDRESS	<b>9500 SW 191 TERR</b>	3.3 STREET ADDRESS	<b>MIAMI, FL 33186</b>
CITY-ST-ZIP	<b>MIAMI FL</b>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

**14. I hereby 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 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

*[Signature]*

**10 APR 1998 (305) 251-8445**

CR2E034 (10/97)