

FILE NOW: FILING FEE AFTER MAY 1, IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000091418 (0)

1. Corporation Name

ARROW TERMITE AND PEST CONTROL INC.



Principal Place of Business

P.O. BOX 3006
KEY LARGO FL 33037

Mailing Address

P.O. BOX 3006
KEY LARGO FL 33037

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

29

30

3. Date Incorporated or Qualified

11/30/1995

3a. Date of Last Report

4. FEI Number

05-0629193

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

SANTE, PAMELA
10021 SW 45 STREET
MIAMI FL 33165

300 ATLANTIC DRIVE
Key Largo, FL 33037

81 Name

Same

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

300 ATLANTIC DRIVE

83

84

City

Key Largo

FL

85

Zip Code

33037

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 typed or printed name of registered agent and address of principal office

Signature typed or printed name of registered agent and address of principal office

DATE

12. OFFICERS AND DIRECTORS

TITLE PT
NAME SANTE, PAMELA
STREET ADDRESS P.O. BOX 3006 300 ATLANTIC DR. STE. 10
CITY-ST-ZIP KEY LARGO FL 33037

TITLE VS
NAME SANTE, CHRIS
STREET ADDRESS P.O. BOX 3006 300 ATLANTIC DR. STE. 10
CITY-ST-ZIP KEY LARGO FL 33037

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

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

500001799785
-04/29/96--01109--012
***200.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Chris Sante

VP

4-1-96

305-451-0910

SC-4-29-96

CR2E034 (12/95)