

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 # P96000019070 (7)

1. Corporation Name

AMERICAN ENVIROMENTAL TERMITE & PEST CONTROL SER
VICES INC.



Principal Place of Business

410 E BOYNTON BEACH BLVD
UNIT B
BOYNTON BEACH FL 33435

Mailing Address

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

3. Date Incorporated or Qualified

03/01/1996

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$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

~~MOELWAIN, ROCKY~~
410 E BOYNTON BEACH BLVD
UNIT B
BOYNTON BEACH FL 33435

10. Name and Address of New Registered Agent

81 Name MALUSKY, Lenny
82 Street Address (P.O. Box Number is Not Acceptable)
410 E. Boynton Beach Blvd.,
Unit B
83 City Boynton Beach FL 85 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*
Signature, typed or printed name of registered agent and title if applicable

Lenny Malusky

(NOTE: Registered Agent signature required when reinstating)

4/18/97

12. OFFICERS AND DIRECTORS

TITLE DP
NAME MALUSKY, LENNY
STREET ADDRESS 1022 BOYNTON PL CIR
CITY-ST-ZIP BOYNTON BEACH FL ☐ DELETE

TITLE DV
NAME MCLEWAIN, ROCKY
STREET ADDRESS 7400 ASLEY SHORE CIR
CITY-ST-ZIP LAKE WORTH FL ☒ DELETE

TITLE DST
NAME PASTOR, HENRY
STREET ADDRESS 3904 DORRIT AVE
CITY-ST-ZIP BOYNTON BEACH FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE Vice President ☒ Change ☐ Addition
2.2 NAME Pastor, Henry
2.3 STREET ADDRESS 3904 Dorrit Ave.
2.4 CITY-ST-ZIP Boynton Beach, FL 33436

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 *Lenny Malusky*

4/18/97

722-1071

CR2E034 (9/96)