

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 13, 1999 8:00 am
Secretary of State

05-13-1999 90031 034 ***150.00

DOCUMENT # P9600052206 ✓
1. Corporation Name
ALL GONE PEST ELIMINATORS, INC.

Principal Place of Business Mailing Address
5406-B 25 STREET WEST 5406-B 25 STREET WEST
BRADENTON, FL 34207 BRADENTON, FL 34207

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 3011 FLORIDA BLVD. 26 3011 FLORIDA BLVD.
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 BRADENTON, FL 28 BRADENTON, FL
Zip Country Zip Country
24 34207 25 34207 29 34207 30

3. Date Incorporated or Qualified
6-19-1996
4. FEI Number Applied For
45-0679709 Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees
8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
JOHNSON, M.E.
5406-B 25 STREET WEST
BRADENTON, FL 34207

10. Name and Address of New Registered Agent
81 Name M.E. JOHNSON
82 Street Address (P.O. Box Number is Not Acceptable)
3011 FLORIDA BLVD.
83
84 City BRADENTON FL 85 Zip Code 34207

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 M. Elizabeth Johnson M. ELIZABETH JOHNSON, PRESIDENT 4-30-99
Signature, typed name and title of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	3011 FLORIDA BLVD.
CITY-ST-ZIP		1.4 CITY-ST-ZIP	BRADENTON, FL 34207
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		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, with all other like empowered.

SIGNATURE: M. Elizabeth Johnson M. ELIZABETH JOHNSON 4-30-99 941-739-020
Signature and typed name of signing officer or director Date Daytime Phone #

CR2E034 (11/98)