

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000024161

FILED
Apr 29, 2008
Secretary of State

Entity Name: REVENGE PEST CONTROL, INC.

Current Principal Place of Business:

13463 78 PLACE NO.
WEST PALM BEACH, FL 33412

New Principal Place of Business:

Current Mailing Address:

13463 78 PLACE NO.
WEST PALM BEACH, FL 33412

New Mailing Address:

FEI Number: 65-0743470

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NABER, ANGELIQUE M
13463 - 78TH PLACE NORTH
WEST PALM BEACH, FL 33412 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NABER, ANGELIQUE M
Address: 13463 - 78TH PLACE NORTH
City-St-Zip: WEST PALM BEACH, FL 33412

Title: DV () Delete
Name: NABER, DANIEL A
Address: 13463 78TH PL. N.
City-St-Zip: WEST PALM BCH., FL 33412

Title: DS () Delete
Name: NABER, DANIEL M
Address: 13463 78TH PL. N.
City-St-Zip: WEST PALM BCH., FL 334125

Title: DT () Delete
Name: NABER, JASON R
Address: 13463 78TH PL. N.
City-St-Zip: WEST PALM BCH., FL 33412

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL M NABER

T

04/29/2008

Electronic Signature of Signing Officer or Director

Date