## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

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## DOCUMENT # P97000075707

LIFE CYCLE PEST CONTROL, INC.



**FILED** Jan 24, 2007 08:00 AM **Secretary of State** 

Principal Place of Business

1165 MANOR COURT WESTON, FL 33326

Mailing Address

1165 MANOR COURT WESTON, FL 33326



01222007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0784624

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROTH, IRA 1165 MANOR COURT WESTON, FL 33326

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	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	d office or re	egistered agent, or bo	oth, in the State of Florida. I am familia	r with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable (NOTE: Registered	Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing	<b>\$5.00</b> May Be Added to Fees	U00000600673 01/26/07-80018-004	150.00
10. OFFICERS AND DIRECTORS						
NAME STREET ADDRESS CITY-ST-ZIP	P IRA ROTH 1165 MANOR COURT WESTON, FL 33326					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						•
TITLE						

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

845 Z868