


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

FILED  
Apr 21 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
<b>DOCUMENT # P97000106307 (6)</b> 1. Corporation Name <b>SHIP SHAPE PEST CONTROL INCORPORATED</b>		
Principal Place of Business <b>3100 N.W. BOCA RATON BLVD., #7016 BOCA RATON FL 33431</b>		Mailing Address <b>3100 N.W. BOCA RATON BLVD., #7016 BOCA RATON FL 33431</b>



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>3256 W. Hillsboro Blvd.</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>3256 W. Hillsboro Blvd</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>12/17/1997</b>	
22 City & State 23 <b>Deerfield Beach, Florida</b> Zip Country 24 <b>33442</b> 25 <b>USA</b>		27 City & State 28 <b>Deerfield Beach, Florida</b> Zip Country 29 <b>33442</b> 30 <b>USA</b>		4. FEI Number <b>650800700</b> Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>KRAVITSKY, LARRY 3100 N.W. BOCA RATON BLVD., #7016 BOCA RATON FL 33431</b>		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code	
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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 *Larry Kravitsky* **Larry Kravitsky President** P/S **3/25/98**  
Signature typed or printed name 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 type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KRAVITSKY, LARRY</b>	1.2 NAME	
STREET ADDRESS	<b>3300 SOUTH OCEAN BOULEVARD, APT. #917</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>HIGHLAND BEACH FL 33487</b>	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KRAVITSKY, LINDA</b>	2.2 NAME	
STREET ADDRESS	<b>3300 SOUTH OCEAN BOULEVARD, APT. #917</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>HIGHLAND BEACH FL 33487</b>	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.

SIGNATURE: *Larry Kravitsky* **Larry Kravitsky** **3/25/98** **954-729-9406**  
Signature typed or printed name of signing officer or director Date Daytime Phone # 0007048

CR2E034 (10/97)