SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name P98000053095

COX PEST SERVICES, INC.

## FILED Sep 20, 1999 8:00 am Secretary of State

09-20-1999 90012 002 \*\*\*150.00



## Principal Place of Business ## S890 UNTY DRIVE ## FRUITAND PARK FL 34731  2							
SSRIO LIMITY DRIVE FRUITLAND PARK R. 34731  2. Principal Place of Busines 2.4. Mating Address 2.5 Plant Place of Busines 2.5 Andreas 2.5 Suite, Apt. #. etc. 2.6 Suite, Apt. #. etc. 2.7 Suite, Apt. #	Principal Place of Business Mailing Address						
2. Principal Place of Business	35910 UNITY DRIVE 35910 UNITY DR						
2. Principal Place of Business   2a. Mailing Address   4. File Number   Applied For   27   28   28   28   3. File Number   3. File Number   3. Suite, Apt. 4, etc.   27   3. Suite, Apt. 4, etc.   3. Certificate of Status Desired   \$8.75 Additional Fee Required   \$8.75 Additional Fee Req	FRUITLAND PARK FL 34731 FRUITLAND PARK FL 34731						DO NOT WRITE IN THIS SPACE
Principal Place of Business   2a, Mailing Address   4, FEI Number   Applied For   Not Applicable   28   27   37 3 3   Not Applicable   27   37 3 5   Not Applicable   28   28   29   30   Russ   28   Not Applicable	,						
2. Principal Place of Business   2a. Mailing Address   2. Principal Place of Business   2a. Mailing Address   2a.   Application   2a.   Suite, Apt. #, etc.   Suite, Apt. #, e	ļ						
Suite, Apt. #, etc.	2 Principal F	Place of Business	2a Mailing Addre	988		<del></del>	
Sulte, Apt. #, etc.    Sulte, Apt. #, etc.							**************************************
City & State   City & State   City & State   City & State   23   Country   28   Country   29   Country   20				etc.			\$8.75 Additional
City & State			<del>}−−</del>	<b>1</b>			S Continuate of Status Desired
Zip   Country   Zip   Country   R. This composition own steet the current year   Interpretation own steet the steet   Interpretation own steet the steet   Interpretation own steet   Interpretation   Interpr		te	~				6. Election Campaign Financing \$5.00 May Be
Zip	23		28	28			
10. Name and Address of New Registered Agent   10. Name and Name   10. Name and Address of New Registered Agent   10. Name and Name   10. Name and Address of New Registered Agent   10. Name and Address of New Registered Agent   10. Name   10. Name and Address of New Registered Agent   10. Name and Address of New Registered Address   10. Name and New Agent		Country Zip Co		ountry	,	This corporation owes the current year	
COX, MICHAEL J 3S910 UNITY DRIVE FRUITLAND PARK FL 34731  11. Pursuant to the provision of sections 607.0502 and 607.1508, Florida Statutes. He above-named corporation submits this statement for the purpose of changing its 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, arm familiar with, and accept the obligations of, section 607.0505, Florida Statutes.  SIGNATURE Signature, uped or printed name of registered agent and title if agelicative.  OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE AVST COX, MICHAEL J 35910 UNITY DRIVE 13.78ME 13.78ME7 ADDRESS CITY-51-2P 11.1TILE 12.78ME 13.78ME7 ADDRESS CITY-51-2P 13.78ME7 AD	24	25 29 30				Intangible Personal Property.	
COX, MICHAEL J 3S910 UNITY DRIVE FRUITLAND PARK FL 34731  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 office or registered agent, and accept the obligations of, section 607.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and accept the obligations of, section 607.0503, Florida Statutes.  SIGNATURE Signature, typed or printed internet of registerion of section 607.0503, Florida Statutes.  SIGNATURE OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE AVST COX, MICHAEL J STREET ADDRESS CITY-512/P  TITLE DELETE 11.TITLE 1.STREET ADDRESS 2.1 STREET ADDRESS 2.2 STREET ADDRESS 2.2 STREET ADDRESS 2.2 STREET ADDRESS 2.2 STREET ADDRESS 2.3 STREET A		9. Name and Address of	Current Registered Agent		1		10. Name and Address of New Registered Agent
35910 UNITY DRIVE FRUITLAND PARK FL 34731  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of sections 807.0502 and 607.1508, Flortida Statute. The above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Flortida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, section 607.0505, Flortida Statute.  SIGNATURE  Signature, typed or printed name of registered agent and the # application.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  12. LAUST  COX, MICHAEL J  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  1.1 TITLE  DELETE  1.2 TITLE  DELETE  2.1 TITLE  DELETE  3.1 TITLE  DELETE  4.1 TITLE  DELETE  4.1 TITLE  DELETE  4.1 TITLE  DELETE  4.1 TITLE  DELETE  4.2 TITLE  DELETE  3.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  DELETE  4.1 TITLE  DELETE  3.1 TITLE  DELETE  3.1 TITLE  DELETE  3.1 TITLE  DELETE  3.1 TITLE  DELETE  3.2 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.1 TITLE  DELETE  3.1 TITLE  DELETE  3.1 TITLE  DELETE  3.1 TITLE  DELETE  3.2 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3.3 STREET ADDRESS  CITY-ST-ZIP  Change  Addition  Change  Change  Addition  Change  Change  Ad	-00	V MOULE I			81	Name	
### FRUITLAND PARK FL 34731  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, and accept the obligations of, section 607.0505, Florida Statutes.    SIGNATURE	· · · · · · · · · · · · · · · · · · ·				82 Street Address (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the observation 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 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 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, in the State of Florida Statutes.  SIGNATURE  Signatura, typed or printed rame of registered agent agent and state agent signature required when reinstating)  DATE  12.							
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, a maintainer with, and accept the obligations of, section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title of appointment as registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  AVST  COX, MICHAEL J  35910 UNITY DRIVE  1,3 STREET ADDRESS  CITY-ST-ZIP  FRUITLAND PARK FL 34731  1,4 CITY-ST-ZIP  DELETE  2,1 TITLE  DELETE  2,1 TITLE  Change  Addition  Addition  NAME  3,3 STREET ADDRESS  CITY-ST-ZIP  CHANGE  3,3 STREET ADDRESS  CITY-ST-ZIP  CHANGE  4,4 CITY-ST-ZIP  DELETE  3,5 TITLE  CHANGE  4,5 TITLE  CHANGE  4,5 TITLE  CHANGE  Addition  AMME  STREET ADDRESS  CITY-ST-ZIP  DELETE  3,5 TITLE  CHANGE  4,5 TITLE  CHANGE  Addition  CHANGE  Addition  AMME  STREET ADDRESS  CITY-ST-ZIP  DELETE  5,5 TITLE  CHANGE  4,5 TITLE  CHANGE  CHANGE  Addition  CHANGE  Addition  AMME  STREET ADDRESS  CITY-ST-ZIP  CHANGE  Addition  AMME  STREET ADDRESS  CITY-ST-ZIP  DELETE  DELETE  5,5 TITLE  CHANGE  CHANGE  STREET ADDRESS  CITY-ST-ZIP  CHANGE  Addition  CHANGE	FRUITLAND PARK FL 34731				83	}	
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, a maintainer with, and accept the obligations of, section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title of appointment as registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  AVST  COX, MICHAEL J  35910 UNITY DRIVE  1,3 STREET ADDRESS  CITY-ST-ZIP  FRUITLAND PARK FL 34731  1,4 CITY-ST-ZIP  DELETE  2,1 TITLE  DELETE  2,1 TITLE  Change  Addition  Addition  NAME  3,3 STREET ADDRESS  CITY-ST-ZIP  CHANGE  3,3 STREET ADDRESS  CITY-ST-ZIP  CHANGE  4,4 CITY-ST-ZIP  DELETE  3,5 TITLE  CHANGE  4,5 TITLE  CHANGE  4,5 TITLE  CHANGE  Addition  AMME  STREET ADDRESS  CITY-ST-ZIP  DELETE  3,5 TITLE  CHANGE  4,5 TITLE  CHANGE  Addition  CHANGE  Addition  AMME  STREET ADDRESS  CITY-ST-ZIP  DELETE  5,5 TITLE  CHANGE  4,5 TITLE  CHANGE  CHANGE  Addition  CHANGE  Addition  AMME  STREET ADDRESS  CITY-ST-ZIP  CHANGE  Addition  AMME  STREET ADDRESS  CITY-ST-ZIP  DELETE  DELETE  5,5 TITLE  CHANGE  CHANGE  STREET ADDRESS  CITY-ST-ZIP  CHANGE  Addition  CHANGE	٦				84	City	85 Zip Code
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. Lam familiar with, and accept the obligations of, section 607.0505, Floridal Statutes.  SIGNATURE    Signature, typed or printed name of registered agent and title if application. (NOTE: Registered Agent signature required when reinstating)   DATE	_					J,	FL   FL   FL   FL   FL   FL   FL   FL
agent. I am familiar with, and accept the obligations of, section 607.0505, Floridal Statutes.  SIGNATURE    Signature, typed or printed name of registered agent and title if applicable.	11. Pursuan	t to the provisions of sections 6	07.0502 and 607.1508, Florida	Statutes, the	above	named cor	poration submits this statement for the purpose of changing its registered
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstalling)  12. OFFICERS AND DIRECTORS  TITLE  AVST COX, MICHAEL J STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FRUTILAND PARK FL 34731  IA CITY-ST-ZIP  TITLE  COX, MICHAEL J STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP  TITLE  COX ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  LA CITY-ST-ZIP  TITLE  COX, MICHAEL J STREET ADDRESS CITY-ST-ZIP  TITLE  Change Addition  AMME STREET ADDRESS CITY-ST-ZIP  TITLE  Change Addition  Ad	oπice or agent. I	registered agent, or both, in the am familiar with, and accept the	a State of Florida, Such change a obligations of, section 607.0	ge was autnori 1505, Florida S	zed by tatutes	tne corpor s.	ation's board of directors. I hereby accept the appointment as registered
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS  TITLE  AVST COX, MICHAEL J STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FRUTILAND PARK FL 34731  IA OTT-ST-ZIP  TITLE  COX, MICHAEL J STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP  TITLE  COX, MICHAEL J STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP  TITLE  COX STREET ADDRESS CITY-ST-ZIP  COX STREET ADDR	SIGNATURE						
TITLE		Signature, typed or printed name of regist	<del></del>			gent signature i	
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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:

TO Whom it may Concern, 617418-90012-2

I never received a first notice for this report. Earlier in the year the office was under construction however it have been getting all other mail sk. I sent 1500 per getting all other mail sk. I sent 1500 per the advise of my C.P.A. Please call me if there are any questions.

Sincerly, Michael J. Cox 352-787-8463.