

FILED
Apr 13, 2006 8:00 am
Secretary of State

3/1

03-16-2006 90229 048 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P98000085534		
1. Entity Name PIERCE PEST CONTROL, INC.		
Principal Place of Business 10310 SW 136 COURT MIAMI, FL 33186		Mailing Address 10310 SW 136 COURT MIAMI, FL 33186
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent CALLAHAN, J.R. 248 WESTWARD DRIVE MIAMI SPRINGS, FL 33186		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, name or printed name of registered agent and title if applicable. (CHECK: Registered Agent signature required when attaching)		
FILE NOW! FEE IS \$150.00 After May 1, 2006 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 may be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PIERCE, MARVIN 13700 SE 108TH STREET MIAMI, FL 33186	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARTIN, STEVE 10310 SW 136TH CT MIAMI, FL 33186	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PIERCE, MARY SUSAN 13700 SW 108TH STREET MIAMI, FL 33186	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MARTIN, TAMRA LYNN 10310 SW 136 CT. MIAMI, FL 33186	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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 this 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.		
SIGNATURE:  Signature and name of officer or director		

66009964



02222006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0870369

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required