

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000012613

FILED
Mar 30, 2009
Secretary of State

Entity Name: KENDALL PEST CONTROL, INC.

Current Principal Place of Business:

11700 S.W. 186TH STREET
MIAMI, FL 33177

New Principal Place of Business:

Current Mailing Address:

11700 S.W. 186TH STREET
MIAMI, FL 33177

New Mailing Address:

FEI Number: 65-0894321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTIAGO, RAMON
11700 S.W. 186TH STREET
MIAMI, FL 33177 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: P () Delete
Name: SANTIAGO, RAMON
Address: 11700 S.W. 186TH STREET
City-St-Zip: MIAMI, FL 33177

Title: V () Delete
Name: SANTIAGO, FABIAN
Address: 28501 SW 152 AVE, LOT 67
City-St-Zip: HOMESTEAD, FL 33033

Title: T () Delete
Name: SANTIAGO, LYDIA
Address: 11700 SW 186 ST
City-St-Zip: MIAMI, FL 33177

Title: S () Delete
Name: SANTIAGO, IDOLIDIA
Address: 11700 S.W. 186TH STREET
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: SANTIAGO, IDOLIDIA
Address: 11700 SW 186 ST
City-St-Zip: MIAMI, FL 33177

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: RAMON SANTIAGO

P

03/30/2009

Electronic Signature of Signing Officer or Director

Date