

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000042536

FILED
Jun 12, 2008
Secretary of State

Entity Name: PEST CONTROL SPECIALISTS, INC.

Current Principal Place of Business:

10647 NW 53 STREET
SUNRISE, FL 33351

New Principal Place of Business:

10761 NW 21 COURT
SUNRISE, FL 33322

Current Mailing Address:

PO BOX 450992
SUNRISE, FL 33345

New Mailing Address:

10761 NW 21 COURT
SUNRISE, FL 33322

FEI Number: 59-2117980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAINE, ROBERT
10647 NW 53 STREET
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

CAINE, ROBERT
10761 NW 21 COURT
SUNRISE, FL 33322 US

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: ROBERT CAINE

06/12/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAINE, ROBERT
Address: 10647 NW 53 STREET
City-St-Zip: SUNRISE, FL 33345

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CAINE, ROBERT
Address: 10761 NW 21 COURT
City-St-Zip: SUNRISE, FL 33322

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: ROBERT CAINE

P

06/12/2008

Electronic Signature of Signing Officer or Director

Date