

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S02473

FILED
Apr 30, 2007
Secretary of State

Entity Name: FREDERICK PEST ELIMINATION, INC.

Current Principal Place of Business:

9315 NW FIRST ST
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

Current Mailing Address:

9315 NW FIRST ST
CORAL SPRINGS, FL 33071 US

New Mailing Address:

FEI Number: 65-0219744 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREDERICK, LARRY
9315 NW FIRST ST. C.
CORAL SPRINGS, FL 33071 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: FALLICK, MICHAEL
Address: 345 ROYAL COVE CIRC
City-St-Zip: DAVIE, FL 33325

Title: VP () Delete
Name: RAMIREZ, BRENDA
Address: 345 ROYAL COVE CIRC
City-St-Zip: DAVIE, FL 33325

Title: S () Delete
Name: FREDERICK, LARRY
Address: 9315 NW FIRST ST.
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T () Delete
Name: FALLICK, PAUL
Address: 309 NW 65TH TERRACE
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: MICHAELFALLICK

PRES

04/30/2007

Electronic Signature of Signing Officer or Director

Date