2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 15, 2006 08:00 AM **DOCUMENT # S42134 Secretary of State** 1. Entity Name GEORGE'S PEST CONTROL SERVICE, INC. Principal Place of Business Malling Address 1937 MEADOW CT 1937 MEADOW CT W PALM BEACH, FL 33406 W PALM BEACH, FL 33406 03122006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0251155 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Hame and Address of Current Registered Agent SHARFI, SYED H. DO NOT WRITE 1148 CARAMBOLA CIR W PALM BEACH, FL 33408 IN THIS SPACE 3. The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, upped or present name of registered agent and the if approachle. (NOTE: Registered Agent signature required when reinstainty) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS to. DDLE NAME HODGKISS, GEORGE E. 1937 MEADOW CT STREET ADDRESS CTTY-ST-ZIP W PALM BEACH, FL U00000469754 03/25/06-80001-015 150.00 TILE NAME HODGKISS, MAGALY R. STREET ADDRESS 1937 MEADOW CT CTY-ST-ZP W PALM BEACH, FL TITLE NUME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME

12. I hereby certify that the information supplied with this filting 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 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 10 or Block 11 if chapter do not not attachment with an address, with all other like empowered.

SIGNATURE: X

STREET ADDRESS
CITY-ST-ZIP
TITLE
KAME
STREET ADDRESS
CITY-ST-ZIP

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3-12-06 6

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(561) 434-0193