

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S52632

FILED
Jul 09, 2007
Secretary of State

Entity Name: GARDENS PEST CONTROL INC.

Current Principal Place of Business:

450 NORTH LAKE RD
UNIT #6
NORTH PALM BEACH, FL 33408 US

New Principal Place of Business:

Current Mailing Address:

450 NORTH LAKE RD
UNIT #6
NORTH PALM BEACH, FL 33408 US

New Mailing Address:

FEI Number: 65-0264438 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORRENTE, JOHN
450 NORTHLAKE ROAD
UNIT #6
NORTH PALM BCH, FL 33408 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

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: CORRENTE, JOHN
Address: 450 NORTH LAKE BLVD, UNIT 6
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOHN CORRENTE

PRES

07/09/2007

Electronic Signature of Signing Officer or Director

_____ Date