FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

A-1 EFFECTIVE: EXTERMINATING, INC.

Mar 26 1998 8:00am					
Secretary of State					

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Principat Place of Business		Mailing Address		1 (BB)(Bill jis inin bille bille bill bibil bill Bibil bibil bibil bibil bibil		
2040 S. MILITARY TRAIL W PALM BEACH FL 33416		2040 S. MILITARY TRAIL W PALM BEACH FL 33416		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified 11/25/1991	I '	
2. Principal Place of Business		2a. Mailing Addr	ess	4, FEI Number Applied For		
21		26		65-0120508 Not Applicable	Θ	
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25	Zıp 29	Country 30	y 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	_	
EDDINGER, PYONG 2040 S. MILITARY TRAIL			81			
W PALM BEACH FL 33415			82			
			В3	1		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

84 City

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change TITLE DELETE 1.1 TITLE ☐ Addition CHOEG, PYONG W NAME 1.2 NAME 2040 S. MILITARY TRAIL STREET ADDRESS 1.3 STREET ADDRESS W PALM BEACH FL 33415 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change __ Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TiTL€ 4.1 TITLE Change ___ Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 9000024701 T9^{ange}
-03/27/98--01012--029 DELETE TITLE 6.1 TITLE 6.2 NAME 63 STREET ADDRESS STREET ADDRESS ***150.00

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

3-20-98 CXI)641-7723

Zip Code