

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000093853

Entity Name: DOMINION PEST MANAGEMENT INC**Current Principal Place of Business:**788 JULY CIRCLE
NORTH FORT MYERS, FL 33903**Current Mailing Address:**788 JULY CIRCLE
NORTH FORT MYERS, FL 33903 US**FEI Number:** 81-4550351**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LEGALCORP SOLUTIONS, LLC
3440 W HOLLYWOOD BLVD. SUITE 415
HOLLYWOOD, FL 33021 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:** TRAVIS CRABTREE

03/19/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	ALVAREZ, HECTOR L
Address	788 JULY CIRCLE
City-State-Zip:	NORTH FORT MYERS FL 33903

Title	TRE
Name	ALVAREZ, HECTOR L
Address	788 JULY CIRCLE
City-State-Zip:	NORTH FORT MYERS FL 33903

Title	SEC
Name	ALVAREZ, HECTOR L
Address	788 JULY CIRCLE
City-State-Zip:	NORTH FORT MYERS FL 33903

Title	VP
Name	ALVAREZ, HECTOR L
Address	788 JULY CIRCLE
City-State-Zip:	NORTH FORT MYERS FL 33903

Title	DIR
Name	ALVAREZ, HECTOR L
Address	788 JULY CIRCLE
City-State-Zip:	NORTH FT MYERS FL 33903

I hereby 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 all other like empowered.

SIGNATURE: HECTOR ALVAREZ**PRESIDENT**

03/19/2025

Electronic Signature of Signing Officer/Director Detail

Date