

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000001757

Entity Name: PARAMOUNT PEST DOCTORS LLC

Current Principal Place of Business:

10130 NORTHLAKE BLVD.
SUITE 214-240
WEST PALM BEACH, FL 33412

Current Mailing Address:

10130 NORTHLAKE BLVD.
SUITE 214-240
WEST PALM BEACH, FL 33412 US

FEI Number: 84-4156894

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOUTH FLORIDA CPA FINANCIAL, INC.
12555 ORANGE DR.
116
DAVIE, FL 33330 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title P
Name TEMPERINO, ANDREA
Address 15202 82ND ST. N
City-State-Zip: LOXAHATCHEE FL 33470

Title VP
Name TEMPERINO, ANTHONY
Address 15202 82ND ST. N
City-State-Zip: LOXAHATCHEE FL 33470

Title TR
Name TEMPERINO, ANTHONY
Address 15202 82ND ST. N
City-State-Zip: LOXAHATCHEE FL 33470

Title SEC
Name TEMPERINO, ANTHONY
Address 15202 82ND ST. N
City-State-Zip: LOXAHATCHEE FL 33470

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANDREA TEMPERINO

PRESIDENT

04/28/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date