# 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 648978** 

Entity Name: INVITRO EXPORTS, INC.

## **Current Principal Place of Business:**

3676 NW 16TH STREET FT. LAUDERDALE, FL 33311

### **Current Mailing Address:**

P.O. BOX 551207 FT. LAUDERDALE, FL 33355 US

# FEI Number: 59-1972167

### Name and Address of Current Registered Agent:

SOBOLEWSKI, CHARLES J. 9440 SEA TURTLE LN PLANTATION, FL 33324 US

Date

Certificate of Status Desired: No

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

## **Officer/Director Detail :**

| Title           | PD                   | Title           | D                    |
|-----------------|----------------------|-----------------|----------------------|
| Name            | SOBOLEWSKI,CHUCK     | Name            | SOBOLEWSKI, KAREN M  |
| Address         | 9440 SEA TURTLE LANE | Address         | 9440 SEA TURTLE LANE |
| City-State-Zip: | PLANTATION FL 33324  | City-State-Zip: | PLANTATION FL 33324  |
| Title           | D                    | Title           | D                    |
| Name            | LAHMAN, KRISTEN      | Name            | SOBOLEWSKI, KEVIN C  |
| Address         | 11000 SW 25 ST       | Address         | 1721 S W 54 TERR     |
| City-State-Zip: | DAVIE FL 33324       | City-State-Zip: | PLANTATION FL 33317  |
| Title           | D                    |                 |                      |
| Name            | SOBOLEWSKI, KIRK P   |                 |                      |
| Address         | 1050 SW 93 AVE       |                 |                      |
| City-State-Zip: | PLANTATION FL 33324  |                 |                      |

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: KRISTEN LAHMAN

DIRECTOR

Electronic Signature of Signing Officer/Director Detail