

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K89594

Entity Name: ADPEN LABORATORIES INC.**Current Principal Place of Business:**11757 CENTRAL PARKWAY
JACKSONVILLE, FL 32224**Current Mailing Address:**11757 CENTRAL PARKWAY
JACKSONVILLE, FL 32224 US**FEI Number:** 59-2961743**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PEREZ, ROLANDO
205 1ST STREET SOUTH #201
JACKSONVILLE BEACH, FL 32250 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**Officer/Director Detail :**

Title	PD
Name	PEREZ, ROLANDO
Address	205 1ST STREET SOUTH #201
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	DMS
Name	PEREZ, MARIA JULIA
Address	205 1ST STREET SOUTH #201
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	LM
Name	PEREZ, ESTEBAN R
Address	11757 CENTRAL PARKWAY
City-State-Zip:	JACKSONVILLE FL 32224

Title	OM
Name	PEREZ, DAVID G
Address	11757 CENTRAL PARKWAY
City-State-Zip:	JACKSONVILLE FL 32224

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: MARIAJULIA PEREZ

VP

04/16/2016

Electronic Signature of Signing Officer/Director Detail_____
Date