## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000087918

Entity Name: METHOD LABORATORIES, INC.

**Current Principal Place of Business:** 

1920 NORTH MIAMI AVENUE MIAMI. FL 33136

**Current Mailing Address:** 

1920 NORTH MIAMI AVENUE MIAMI, FL 33136

FEI Number: 26-0645825 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GETKER, PATRICIA M 1920 NORTH MIAMI AVENUE MIAMI, FL 33136 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

FILED Jan 12, 2015

**Secretary of State** 

CC2983537126

Officer/Director Detail:

Title P Title VP

Name GETKER, PATRICIA M Name SAVITZ, MICHAEL

Address 1920 NORTH MIAMI AVENUE Address 1920 NORTH MIAMI AVENUE

City-State-Zip: MIAMI FL 33138 City-State-Zip: MIAMI FL 33138

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.

Electronic Signature of Signing Officer/Director Detail