

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000111465

Entity Name: LAB PHARMACEUTICALS CORP.

Current Principal Place of Business:

4010 UNIVERSITY DRIVE
CORAL GABLES, FL 33146

Current Mailing Address:

4010 UNIVERSITY DRIVE
CORAL GABLES, FL 33146

FEI Number: 26-3999549

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FABRE, FRANK RESQ
2310 COUNTRY CLUB PRADO
CORAL GABLES, FL 33134 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 PSD
Name BELLON, LEO A
Address 4010 UNIVERSITY DRIVE
City-State-Zip: CORAL GABLES FL 33146

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: LEO A. BELLON

PSD

04/28/2015

Electronic Signature of Signing Officer/Director Detail

Date