

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000007718

**Entity Name:** INNOVATIVE TOXICOLOGY CONSULTING, LLC

**Current Principal Place of Business:**

9735 VIA VERGA ST.  
LAKE WORTH, FL 33467

**Current Mailing Address:**

9735 VIA VERGA ST.  
LAKE WORTH, FL 33467 US

**FEI Number:** 20-8275124

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GLAZER, ERIC LESQ.  
2300 CORPORATE BLVD. NW  
SUITE 232  
BOCA RATON, FL 33431 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 MGRM  
Name SCHECHTMAN, LEONARD M. PHD  
Address 9735 VIA VERGA ST.  
City-State-Zip: LAKE WORTH FL 33467

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:** LEONARD M. SCHECHTMAN, PH.D.

MGRM

04/14/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date