2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 648978

Current Principal Place of Business:

SOBOLEWSKI, CHUCK,

Name:

Entity Name: INVITRO EXPORTS, INC.

FILED Jul 10, 2006 Secretary of State

3676 NW 16 STREET P.O. BOX 15700 FT. LAUDERDALE, FL 33311 US	1000 N.W. 56TH STREET FT. LAUDERDALE, FL 33309 US
Current Mailing Address:	New Mailing Address:
3676 NW 16 STREET P.O. BOX 15700 FT. LAUDERDALE, FL 33311 US	1000 N.W. 56TH STREET FT. LAUDERDALE, FL 33309 US
FEI Number: 59-1972167 FEI Number Applied For ()	El Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
SOBOLEWSKI, CHARLES J. 9440 SEA TURTLE LN PLATATION, FL 33324 US	SOBOLEWSKI, CHARLES J. 9440 SEA TURTLE LN PLANTATION, FL 33324 US
The above named entity submits this statement for the purp in the State of Florida.	ose of changing its registered office or registered agent, or both,
SIGNATURE: KRISTEN LAHMAN	07/10/2006
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: PD () Delete	Title: () Change () Addition

Name:

New Principal Place of Business:

9440 SEA TURTLE LANE Address: Address: City-St-Zip: PLANTATION, FL 33324 City-St-Zip: Title: () Delete Title: () Change () Addition SOBOLEWSKI, KAREN M, Name: Name: Address: 9440 SEA TURTLE LANE Address: PLANTATION, FL 33324 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition Name: LAHMAN, KRISTEN Name: 11000 SW 25 ST Address: Address: City-St-Zip: **DAVIE, FL 33324** City-St-Zip: Title: () Delete Title: () Change () Addition SOBOLEWSKI, KEVIN C Name: Name: Address: 1721 S W 54 TERR Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip: Title: Title: () Delete () Change () Addition SOBOLEWSKI, KIRK P Name: Name: Address: 1050 SW 93 AVE Address: PLANTATION, FL 33324 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

07/10/2006