

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000103223

Entity Name: PB LABORATORIES, LLC

**FILED**  
**Nov 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7451 SOUTH MILITARY TRAIL  
LAKE WORTH, FL 33463 US

**New Principal Place of Business:**

**Current Mailing Address:**

7451 SOUTH MILITARY TRAIL  
LAKE WORTH, FL 33463 US

**New Mailing Address:**

FEI Number: 20-3650491

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: HOLLIS, SHARON  
Address: 7451 SOUTH MILITARY TRAIL  
City-St-Zip: LAKE WORTH, FL 33463 US

Title: CEO  
Name: HOLLIS, SHARON  
Address: 7451 SOUTH MILITARY TRAIL  
City-St-Zip: LAKE WORTH, FL 33463 US

Title: COO  
Name: HOLLIS, SHARON  
Address: 7451 SOUTH MILITARY TRAIL  
City-St-Zip: LAKE WORTH, FL 33463 US

Title: S  
Name: FORHAN, WILLIAM G  
Address: 7451 SOUTH MILITARY TRAIL  
City-St-Zip: LAKE WORTH, FL 33463 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: SHARON HOLLIS

MGR

11/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date