

2007

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2007 8:00 am
Secretary of State

05-01-2007 90029 044 ***150.00

DOCUMENT # P04000056709
1. Entity Name Labco Corporation, Inc.

DO NOT WRITE IN THIS SPACE

40095481

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 7781 Embassy Blvd. Suite, Apt. #, etc.	3. Mailing Address 7781 Embassy Blvd. Suite, Apt. #, etc.
City & State Miramar, FL Zip 33023-6407 Country USA	City & State Miramar, FL Zip 33023-6407 Country USA

4. FEI Number 20-0957678	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name Perez, Pedro A.
Street Address (P.O. Box Number is Not Acceptable) 7781 Embassy Blvd.
City Miramar
Zip Code FL 33023-6407

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____

January 1 - May 1, Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D/P	NAME Perez, Pedro A.	STREET ADDRESS 7781 Embassy Blvd.	CITY - ST - ZIP Miramar, FL 33023
TITLE D/S/T	NAME Ramirez, Liliana	STREET ADDRESS 7781 Embassy Blvd.	CITY - ST - ZIP Miramar, FL 33023
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
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TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP

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CR2E034B (12/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Pedro A. Perez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/03/07

954-961-1437