

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000072339

1. Entity Name
LABWORLD INTERNATIONAL CORP.Principal Place of Business
2828 CORAL WAY #410
MIAMI, FL 33145Mailing Address
2828 CORAL WAY #410
MIAMI, FL 33145U000000737212
05/11/07-80018-016 150.00

DO NOT WRITE IN THIS SPACE

04242007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0616132Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALVAREZ, FAUSTO
2828 CORAL WAY #410
MIAMI, FL 33145DO NOT WRITE
IN THIS SPACE

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

Signature typed or printed name of registered agent and state if applicable.

(NOTE: Registered Agent signature required when changing)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.009. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	YNERIAN, PEDRO G
STREET ADDRESS	2828 CORAL WAY #410
CITY-ST-ZIP	MIAMI, FL 33145
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #