## **2023 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P14000092233

Entity Name: SOUTH GENETICS, INC

**Current Principal Place of Business:** 

3250 NE 1ST AVE MIAMI, FL 33137

**Current Mailing Address:** 

3250 NE 1ST AVE MIAMI, FL 33137 US

FEI Number: 46-1642122 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PENA, MINELLY 2704 REW CIRCLE, SUITE 105G OCOEE, FL 34761 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: MINELLY PENA 09/07/2023

Electronic Signature of Registered Agent

Date

FILED Sep 07, 2023

**Secretary of State** 

9039466146CC

## Officer/Director Detail:

Name

Address

CAVA. ANIBAL

City-State-Zip: MIAMI FL 33137

3250 NE 1ST AVE

VP	Title	DIRECTOR
CAVA, SIMON	Name	CLAVIER, CHRISTIAN
3250 NE 1ST AVE	Address	3250 NE 1ST AVE
MIAMI FL 33137	City-State-Zip:	MIAMI FL 33137
SECRETARY	Title	DIRECTOR
CLAVIER, VILMA	Name	CLAVIER, JOSE
3250 NE 1ST AVE	Address	3250 NE 1ST AVE
MIAMI FL 33137	City-State-Zip:	MIAMI FL 33137
DIRECTOR	Title	DIRECTOR
	CAVA, SIMON 3250 NE 1ST AVE MIAMI FL 33137 SECRETARY CLAVIER, VILMA 3250 NE 1ST AVE MIAMI FL 33137	CAVA, SIMON  3250 NE 1ST AVE  MIAMI FL 33137  SECRETARY  CLAVIER, VILMA  3250 NE 1ST AVE  MIAMI FL 33137  City-State-Zip:  Address  MIAMI FL 33137  City-State-Zip:

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 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 all other like empowered.

Name

Address

City-State-Zip:

CLAVIER, MARIA

3250 NE 1ST AVE

MIAMI FL 33137

SIGNATURE: SIMON CAVA VP 09/07/2023