

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000099935

**Entity Name:** UNITED LABOR RX BENEFITS CORPORATION

**Current Principal Place of Business:**

13860 WELLINGTON TRACE #38-232  
WELLINGTON, FL 33414

**Current Mailing Address:**

13860 WELLINGTON TRACE #38-232  
WELLINGTON, FL 33414 US

**FEI Number:** 47-2552978

**Certificate of Status Desired:** No

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

ZANOTTI, TRACEY  
13860 WELLINGTON TRACE #38-232  
WELLINGTON, FL 33414 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title	PVST	Title	D
Name	ZANOTTI, TRACEY	Name	ZANOTTI, TRACEY
Address	13860 WELLINGTON TRACE #38-232	Address	13860 WELLINGTON TRACE #38-232
City-State-Zip:	WELLINGTON FL 33414	City-State-Zip:	WELLINGTON FL 33414

*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.*

**SIGNATURE:** TRACEY ZANOTTI

**PRESIDENT**

**02/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date