

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000118699

Entity Name: LABCO IMPORT & EXPORT, L L C**Current Principal Place of Business:**7301 WILES ROAD
SUITE 107
CORAL SPRINGS, FL 33067**Current Mailing Address:**7301 WILES ROAD
SUITE 107
CORAL SPRINGS, FL 33067**FEI Number:** 20-4427872**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**AR FINANCIAL SERVICES
7301 WILES ROAD
SUITE 107
CORAL SPRINGS, FL 33067 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**Authorized Person(s) Detail :**

Title	MGRM
Name	JIMENEZ, ALBERTO
Address	318 INDIAN TRACE NO.212
City-State-Zip:	WESTON FL 33326

Title	MGRM
Name	RODRIGUEZ, CARLOS
Address	679 LAKE BOULEVARD
City-State-Zip:	WESTON FL 33326

Title	MGRM
Name	GALIZIA, GIOVANBATISTA
Address	4074 W WHITEWATER AV
City-State-Zip:	WESTON FL 33332

Title	MGRM
Name	CARDELINO, OSCAR
Address	249 LANDINGS BLVD
City-State-Zip:	WESTON FL 33327

Title	MGRM
Name	RIVAS, LUIS F
Address	6947 N.W. 110 LANE PARKLAND
City-State-Zip:	PARKLAND FL 33076

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GIOVANBATISTA GALIZIA

MGRM

04/28/2014

Electronic Signature of Signing Authorized Person(s) Detail_____
Date