

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000062293

**Entity Name:** ALDANA LASER AESTHETICS UNLIMITED INC

**Current Principal Place of Business:**

6412 NW 105 PL  
DORAL, FL 33178

**FILED**  
**Mar 02, 2017**  
**Secretary of State**  
**CC5023266931**

**Current Mailing Address:**

6412 NW 105 PL  
DORAL, FL 33178

**FEI Number: 81-3384228**

**Certificate of Status Desired: No**

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

ALDANA, GUILLERMO J  
6412 NW 105 PL  
DORAL, FL 33178 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	P	Title	VP
Name	ALDANA, GUILLERMO J	Name	RADEMAKER, ROSE E
Address	6412 NW 105 PL	Address	6412 NW 105 PL
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

*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: GUILLERMO ALDANA**

**PRESIDENT**

**03/02/2017**

Electronic Signature of Signing Officer/Director Detail

Date