

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000103249

Entity Name: ANNABELLA CLINICAL SKIN, LLC

Current Principal Place of Business:

3270 SUNTREE BLVD
SUITE 219
MELBOURNE, FL 32940

Current Mailing Address:

565 BRIMWOOD WAY
MELBOURNE, FL 32940

FEI Number: 27-3600007

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARTER, ANNE E
565 BRIMWOOD WAY
MELBOURNE, FL 32940 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 MGR
Name CARTER, ANNE E
Address 565 BRIMWOOD WAY
City-State-Zip: MELBOURNE FL 32940

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: ANNE CARTER _____

OWNER

01/22/2016

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date