

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000005249

**Entity Name:** ACUPRESSURE MLD MASSAGE LLC

**Current Principal Place of Business:**

USA FLEA MARKET 11721 US HIGHWAY 19  
BOOTH # 53  
PORT RICHEY, FL 34668

**Current Mailing Address:**

15820 DEEP CREEK LANE  
TAMPA, FL 33624

**FEI Number:** 46-4908901

**Certificate of Status Desired:** Yes

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

REYES, ANSELMO I  
15820 DEEP CREEK LANE  
TAMPA, FL 33624 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	Title	MGRM
Name	REYES, ANSELMO I	Name	REYES, HEE
Address	15820 DEEP CREEK LANE	Address	15820 DEEP CREEK LANE
City-State-Zip:	TAMPA FL 33624	City-State-Zip:	TAMPA FL 33624

*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:** ANSELMO REYES

04/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date