

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000228576

Entity Name: FLORIDA LUXURY SPA GROUP, LLC**Current Principal Place of Business:**770 SOUTH DIXIE HIGHWAY
SUITE 200
CORAL GABLES, FL 33146**Current Mailing Address:**770 SOUTH DIXIE HIGHWAY
SUITE 200
CORAL GABLES, FL 33146 US**FEI Number:** 65-1104938**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	MANAGER, CHAIRMAN
Name	FLUXMAN, LEONARD I.
Address	770 SOUTH DIXIE HIGHWAY SUITE 200
City-State-Zip:	CORAL GABLES FL 33146

Title	COO, CFO
Name	LAZARUS, STEPHEN
Address	770 SOUTH DIXIE HIGHWAY SUITE 200
City-State-Zip:	CORAL GABLES FL 33146

Title	SECRETARY
Name	FYODOROVA, INGA A.
Address	770 SOUTH DIXIE HIGHWAY SUITE 200
City-State-Zip:	CORAL GABLES FL 33146

Title	VP
Name	FERNANDEZ, JACKIE
Address	770 SOUTH DIXIE HIGHWAY SUITE 200
City-State-Zip:	CORAL GABLES FL 33146

Title	VP
Name	PADILLA, JESUS
Address	770 SOUTH DIXIE HIGHWAY SUITE 200
City-State-Zip:	CORAL GABLES FL 33146

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: INGA A. FYODOROVA**SECRETARY****04/20/2023**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date