

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000019270

Entity Name: OM PLASTIC SURGERY LLC

Current Principal Place of Business:

701 SOUTH OLIVE AVE
#2009
WEST PALM BEACH, FL 33401

Current Mailing Address:

701 SOUTH OLIVE AVE
#2009
WEST PALM BEACH, FL 33401 US

FEI Number: 82-4037198

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VIBHAKAR, DEV B
701 SOUTH OLIVE AVE
#2009
WEST PALM BEACH, FL 33401 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 AP
Name VIBHAKAR, DEV B
Address 701 SOUTH OLIVE AVE
#2009
City-State-Zip: WEST PALM BEACH FL 33401

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: DEV VIBHAKAR

OWNER

02/10/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date