

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000014531

**Entity Name:** PERFECT SYMMETRY PERMANENT MAKE-UP, LLC

**Current Principal Place of Business:**

3813 SOUTH NOVA RD.  
UNIT 105 SUITE #123  
PORT ORANGE, FL 32127

**Current Mailing Address:**

2394 BELEN DR.  
DELTONA, FL 32738 UN

**FEI Number:** 84-1966544

**Certificate of Status Desired:** No

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

MICALE, AGNES G  
2394 BELEN DRIVE,  
DELTONA, FL 32738 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            AMBR  
Name            MICALE, AGNES G  
Address        2394 BELENDRIVE  
City-State-Zip: DELTONA FL 32738

*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:** AGNES GABRIELLA MICALE

**OWNER**

**03/19/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date