

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000067568

**Entity Name:** SELF-CARE NAILS & SPA LLC

**Current Principal Place of Business:**

766 W 41 ST  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

8001 CRESPI BLVD  
6 C  
MIAMI BEACH, FL 33141 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

GIANGUALANI, PAOLA  
8001 CRESPI BLVD  
6 C  
MIAMI BEACH, FL 33141 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	PR	Title	MGR
Name	GIANGUALANI, OSCAR	Name	GIANGUALANI, PAOLA
Address	8001 CRESPI BLVD, APT 6 C	Address	8001 CRESPI BLVD, APT 6 C
City-State-Zip:	MIAMI BEACH FL 33141	City-State-Zip:	MIAMI BEACH FL 33141

*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:** PAOLA GIANGUALANI

MGR

04/28/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date