

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000323166

Entity Name: SENSORY PILATES METHOD, LLC**Current Principal Place of Business:**8790 SW 132 ST
MIAMI, FL 33176**Current Mailing Address:**8790 SW 132 ST
MIAMI, FL 33176 US**FEI Number:** 85-3555989**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GOMEZ, ENRIQUE
8790 SW 132 ST
MIAMI, FL 33176 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	MGR	Title	MGR
Name	GOMEZ, ENRIQUE	Name	DOUCETT, NICOLE T
Address	8790 SW 132 ST	Address	720 NE 62 ST
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33138
Title	MGR		
Name	DE NOVI, GUILLERMO		
Address	8790 SW 132 ST		
City-State-Zip:	MIAMI FL 33176		

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: ENRIQUE GOMEZ

CO-OWNER

03/15/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date