

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000023983

**Entity Name:** MED ESTETICA MIAMI LLC

**Current Principal Place of Business:**

5091 NW 7TH ST APT 1210  
MIAMI, FL 33126

**Current Mailing Address:**

5091 NW 7TH ST APT 1210  
MIAMI, FL 33126

**FEI Number:** 86-1793550

**Certificate of Status Desired:** No

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

RIBOT BUSINESS SOLUTIONS  
28 W FLAGLER ST  
STE 1200D  
MIAMI, FL 33130 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:** ROY RIBOT

07/07/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MBR  
Name AVON, JUAN M  
Address 5091 NW 7TH ST APT 1210  
City-State-Zip: MIAMI FL 33126

*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:** AVON , JUAN M

MBR

07/07/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date