

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000002725

**Entity Name:** DOME COSMETICS LLC

**Current Principal Place of Business:**

1038 RAINING MEADOWS LN  
ORLANDO, FL 32824

**Current Mailing Address:**

1038 RAINING MEADOWS LN  
ORLANDO, FL 32824 US

**FEI Number:** 99-0568684

**Certificate of Status Desired:** No

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

TORRES, KRISTINA  
1038 RAINING MEADOWS LN  
ORLANDO, FL 32824 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 TORRES, KRISTINA  
Address 1038 RAINING MEADOWS LN.  
City-State-Zip: ORLANDO FL 32824

Title AMBR  
Name TORRES III, ROBERTO  
Address 1038 RAINING MEADOWS LN.  
City-State-Zip: ORLANDO FL 32824

Title AMBR  
Name TORRES, KARLA  
Address 1038 RAINING MEADOWS LN.  
City-State-Zip: ORLANDO FL 32824

*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:** KRISTINA TORRES

AMBR

04/25/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date