

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000019005

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** BEAUTY AND WELLNESS STUDIO L.L.C.

**Current Principal Place of Business:**

2500 EAST COMMERCIAL BLVD, STE B  
FT LAUDERDALE, FL 33308

**New Principal Place of Business:**

2500 EAST COMMERCIAL BLVD, SUITE B  
FT LAUDERDALE, FL 33308

**Current Mailing Address:**

P O BOX 22512  
FT LAUDERDALE, FL 33335

**New Mailing Address:**

P O BOX 22512  
FT LAUDERDALE, FL 33335

**FEI Number:** 26-2067870

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARCIA, DULCE  
2500 EAST COMMERCIAL BLVD, STE B  
FT LAUDERDALE, FL 33308 US

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

GARCIA, DULCE  
2500 EAST COMMERCIAL BLVD, SUITE B  
FT LAUDERDALE, FL 33308 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:

04/28/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GARCIA, DULCE  
Address: 2500 EAST COMMERCIAL BLVD SUITE B  
City-St-Zip: FT LAUDERDALE, FL 33308

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: DULCE GARCIA

DG

04/28/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date