

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000060662

**Entity Name:** BEATRIZ CHAMORRO SALON & SPA INC.

**Current Principal Place of Business:**

12720 SOUTH ORANGE BLOSSOM TR.  
SUITE 8  
ORLANDO, FL 32837

**Current Mailing Address:**

12720 SOUTH ORANGE BLOSSOM TR.  
SUITE 8  
ORLANDO, FL 32837 US

**FEI Number:** 45-5576450

**Certificate of Status Desired:** No

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

RUIZ, RONALD  
3173 DASHA PALM DR.  
KISSIMMEE, FL 34744 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

**Officer/Director Detail :**

Title	P	Title	VP
Name	RUIZ, RONALD	Name	CHAMORRO, BEATRIZ
Address	3173 DASHA PALM DR.	Address	3173 DASHA PALM DR.
City-State-Zip:	KISSIMMEE FL 34744	City-State-Zip:	KISSIMMEE FL 34744

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RONALD RUIZ

**PRESIDENT**

**04/09/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date