

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000018272

**Entity Name:** FASCINO MED SPA CORP

**Current Principal Place of Business:**

11410 W SAMPLE RD  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

11785 ROYAL PALM BLVD SUITE 101  
CORAL SPRINGS, FL 33065

**FEI Number:** 82-0677484

**Certificate of Status Desired:** No

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

PEREZ, NATALIA A  
11785 ROYAL PALM BLVD SUITE 101  
CORAL SPRINGS, FL 33065 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 VP, D  
Name PEREZ, NATALIA A  
Address 11785 ROYAL PALM BLVD SUITE 101  
City-State-Zip: CORAL SPRINGS FL 33065

Title P, D  
Name PEREZ, VERONICA A  
Address 11785 ROYAL PALM BLVD SUITE 101  
City-State-Zip: CORAL SPRINGS FL 33065

*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:** NATALIA A PEREZ

**VICE PRESIDENT**

**05/01/2023**

Electronic Signature of Signing Officer/Director Detail

Date