

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000040568

Entity Name: JUVENEX LASER MEDICAL SPA, INC.

Current Principal Place of Business:

631 SW 65 AVE
MIAMI, FL 33144

Current Mailing Address:

631 SW 65 AVE
MIAMI, FL 33144 US

FEI Number: 84-1782904

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ESPINOSA, YUDELKIS
631 SW 65 AVE
MIAMI, FL 33144 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
Name ESPINOSA, YUDELKIS
Address 631 SW 65 AVE
City-State-Zip: MIAMI FL 33144

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: YUDELKIS ESPINOSA

OWNER

02/15/2021

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date