

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P23000065737

**Entity Name:** BFF HEAD & HAIR THERAPY CORP

**Current Principal Place of Business:**

1100 S FEDERAL HWY  
STE 424  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

1100 S FEDERAL HWY  
STE 424  
DEERFIELD BEACH, FL 33441 US

**FEI Number:** 93-3383233

**Certificate of Status Desired:** Yes

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

TAX HOUSE CORPORATION  
1100 S FEDERAL HWY  
DEERFIELD BEACH, FL 33441 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            DIR  
Name            MAGARAO DUARTE, LUCIANA  
Address        1100 S FEDERAL HWY SUITE 424  
City-State-Zip: DEERFIELD BEACH FL 33441

Title            DIR  
Name            MARIANO LEMES, CAMILA  
Address        1100 S FEDERAL HWY SUITE 424  
City-State-Zip: DEERFIELD BEACH FL 33441

*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:** LUCIANA MAGARAO DUARTE

**DIR**

**03/06/2025**

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

\_\_\_\_\_  
Date