

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026564

Entity Name: ROGER'S MASSAGE THERAPY CLINIC, LLC

Current Principal Place of Business:

1161 E ALTAMONTE DR
SUITE 1019
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

1161 E ALTAMONTE DR
SUITE 1019
ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 54-2078926

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORRALES, ROGER
673 VENEER DRIVE
ALTAMONTE SPRINGS, FL 32714 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

Authorized Person(s) Detail :

Title MGR
Name CORRALES, ROGER
Address 673 VENEER DRIVE
City-State-Zip: ALTAMONTE SPRINGS FL 32714

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROGER CORRALES

PRESIDENT

01/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date