

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000021094

**Entity Name:** C & I SALON LLC

**Current Principal Place of Business:**

2525 EMBASSY DRIVE SOUTH  
12  
COOPER CITY, FL 33026

**Current Mailing Address:**

2525 EMBASSY DRIVE SOUTH  
12  
COOPER CITY, FL 33026

**FEI Number:** 20-0882152

**Certificate of Status Desired:** No

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

KINCHELOW, CHRISTINE  
2525 EMBASSY DRIVE SOUTH.  
COOPER CITY, FL 33026 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 KINCHELOW, CHRISTINE  
Address 2525 EMBASSY DRIVE SOUTH.  
City-State-Zip: COOPER CITY FL 33026

Title MGR  
Name SCANAPICO, RITA  
Address 5081 SW 27 AVENUE  
City-State-Zip: FT. LAUDERDALE FL 33312

*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:** RITA SCANAPICO

MGR

01/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date