

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000038545

**Entity Name:** AQUABLISS INSTITUTE L.L.C.

**Current Principal Place of Business:**

12140 S.W. 101 AVE.  
MIAMI, FL 33176

**Current Mailing Address:**

12140 S.W. 101 AVE.  
MIAMI, FL 33176

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

FREUND, IRWIN  
10729 S.W. 104TH ST.  
MIAMI, FL 33176 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 MGRM  
Name FRANCS, VICTOR  
Address 12140 S.W. 101 AVE.  
City-State-Zip: MIAMI FL 33176

*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:** VICTOR FRANCS

MGRM

02/05/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date