

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000123500

**Entity Name:** CROSSTRaining THERAPEUTIC MASSAGE & BODYWORKS  
LLC

**FILED**  
**Mar 30, 2022**  
**Secretary of State**  
**2053010365CC**

**Current Principal Place of Business:**

2686 BOLZANO DR.  
APOPKA, FL 32712

**Current Mailing Address:**

P.O. BOX 161482  
ALTAMONTE SPRINGS, FL 32716

**FEI Number: 46-4866413**

**Certificate of Status Desired: No**

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

GILES, GIA L  
2686 BOLZANO DR.  
APOPKA, FL 32712 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 GILES, GIA L  
Address P.O. BOX 161482  
City-State-Zip: ALTAMONTE SPRINGS FL 32716

*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: GIA GILES**

**MGR**

**03/30/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date