

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000153454

Entity Name: ANTHONY SPADAVECCHIO MASSAGE THERAPIST LLC

Current Principal Place of Business:

4327 S. HWY 27
CLERMONT,, FL 34711

Current Mailing Address:

4327 S. HWY 27
CLERMONT,, FL 34711

FEI Number: 35-2474113

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SPADAVECCHIO, ANTHONY
4327 S. HWY 27
CLERMONT,, FL 34711 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 CEO
Name SPADAVECCHIO, ANTHONY
Address 4327 S. HWY 27
City-State-Zip: CLERMONT FL 34711

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY SPADAVECCHIO

CEO

04/26/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date