

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000020782

Entity Name: LASER WITH CARE, LLC

Current Principal Place of Business:

7200 NW 6TH CT
PLANTATION, FL 33317

Current Mailing Address:

POBOX 17154
PLANTATION, FL 33318 US

FEI Number: 47-3008921

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALIMA, TAMIR
109 NW 72 AV
PLANTATION, FL 33317 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 ALIMA, TAMIR
Address POBOX 17154
City-State-Zip: PLANTATION FL 33318

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: TAMIR ALIMA

PRESIDENT

04/30/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date