

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000023257

**Entity Name:** CARMEN CARE LASER LLC

**Current Principal Place of Business:**

3301 NW 2ND AVENUE, STE 100  
BOCA RATON, FL 33431

**Current Mailing Address:**

3301 NW 2ND AVENUE, STE 100  
BOCA RATON, FL 33431 US

**FEI Number:** 81-1346191

**Certificate of Status Desired:** No

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

CARMEN, LESLIE  
3301 NW 2ND AVENUE, STE 100  
BOCA RATON, FL 33431 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            PRESIDENT  
Name            CARMEN, LESLIE  
Address        3301 NW 2ND AVENUE, STE 100  
City-State-Zip: BOCA RATON FL 33431

*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:** LESLIE CARMEN

**PRESIDENT**

**02/08/2022**

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

\_\_\_\_\_ Date