#### 2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L16000023257

Entity Name: CARMEN CARE LASER LLC

**FILED** May 02, 2024 **Secretary of State** 1295031593CC

# **Current Principal Place of Business:**

5765 NORTH FEDERAL HIGHWAY BOCA RATON, FL 33487

## **Current Mailing Address:**

5765 NORTH FEDERAL HIGHWAY BOCA RATON. FL 33487 US

FEI Number: 81-1346191 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CARMEN, LESLIE 5765 NORTH FEDERAL HIGHWAY BOCA RATON, FL 33487 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:

**PRESIDENT** Title

Name CARMEN, LESLIE

Address 5765 NORTH FEDERAL HIGHWAY

City-State-Zip: BOCA RATON FL 33487

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** Electronic Signature of Signing Authorized Person(s) Detail

05/02/2024