

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000064316

**Entity Name:** AESTHETIC EDUCATORS, LLC

**Current Principal Place of Business:**

11504 WHISPERING HOLLOW DRIVE  
TAMPA, FL 33635

**Current Mailing Address:**

11504 WHISPERING HOLLOW DRIVE  
TAMPA, FL 33635

**FEI Number:** 82-5365101

**Certificate of Status Desired:** Yes

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

CARDIOSONICS, INC.  
11504 WHISPERING HOLLOW DRIVE  
TAMPA, FL 33635 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	Title	AP
Name	MORALES, CHERI L	Name	MORALES, MARIO
Address	11504 WHISPERING HOLLOW DRIVE	Address	11504 WHISPERING HOLLOW DRIVE
City-State-Zip:	TAMPA FL 33635	City-State-Zip:	TAMPA FL 33635

*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:** CHERI L. MORALES

**PRESIDENT**

**06/28/2020**

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

\_\_\_\_\_  
Date