

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000096608

**Entity Name:** SOUTH BEACH COSMETIC HAIR PIGMENTATION CENTER LLC

**Current Principal Place of Business:**

7403 COLLINS AVE  
STE 206  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

7403 COLLINS AVE  
STE 206  
MIAMI BEACH, FL 33141 US

**FEI Number:** 82-1387492

**Certificate of Status Desired:** No

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

FLORES, DAVID  
7930 CRESPI BLVD  
APT B  
MIAMI BEACH, FL 33141 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            AMBR  
Name            FLORES, DAVID  
Address        7930 CRESPI BLVD APT B  
City-State-Zip: MIAMI BEACH FL 33141

*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:** DAVID FLORES

AMBR

04/16/2018

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

\_\_\_\_\_  
Date