## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000105176

**Entity Name: CENTER FOR PERMANENT AND CORRECTIVE COSMETICS** 

LLC

Apr 28, 2024

**Secretary of State** 6367283736CC

**FILED** 

## **Current Principal Place of Business:**

3049 SEIGNEURY DR WINDERMERE, FL 34786

# **Current Mailing Address:**

3049 SEIGNEURY DR WINDERMERE, FL 34786 US

FEI Number: 82-1882580 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

THOMPSON, KRISTA ESQ. 3049 SEIGNEURY DR WINDERMERE, FL 34786 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:

Name THOMPSON, KRISTA ESQ. Address 3049 SEIGNEURY DR City-State-Zip: WINDERMERE FL 34786

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.

04/28/2024 **MANAGER** SIGNATURE: KRISTA THOMPSON