

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000155838

**Entity Name:** GEL NAILS BY JOHN TRAM LLC

**Current Principal Place of Business:**

16670 S US HWY 441  
105  
SUMMERFIELD, FL 34491

**Current Mailing Address:**

16670 S US HWY 441  
105  
SUMMERFIELD, FL 34491

**FEI Number:** 82-2298671

**Certificate of Status Desired:** No

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

TRAM, JOHN  
9315 SE 162ND PLACE  
SUMMERFIELD, FL 34491 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  
Name TRAM, JOHN  
Address 9315 SE 162ND PLACE  
City-State-Zip: SUMMERFIELD FL 34491

*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:** JOHN TRAM

**MANAGER**

**01/31/2021**

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

\_\_\_\_\_  
Date