

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000199089

**Entity Name:** CELESTIAL MASSAGE & WELLNESS CENTER LLC

**Current Principal Place of Business:**

530 US 41 BYPASS S  
UNIT 7A  
VENICE, FL 34285

**Current Mailing Address:**

530 US 41 BYPASS S.  
UNIT 7A  
VENICE, FL 34285

**FEI Number:** 82-2929296

**Certificate of Status Desired:** No

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

ZECH, DOROTHY  
824 CINCY ST  
VENICE, FL 34285 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 ZECH, DOROTHY  
Address 824 CINCY ST  
City-State-Zip: VENICE FL 34285

*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:** DOROTHY ZECH

**MANAGER**

**03/04/2024**

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

\_\_\_\_\_  
Date