

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000061487

Entity Name: HEALTH AND BEAUTY FAMILY LLC

Current Principal Place of Business:

17070 COLLINS AVE,
SUITE 259
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

16425 COLLINS AVE
1815
SUNNY ISLES BEACH, FL 33160 US

FEI Number: 83-4103367

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SHOLOSHEK, VITALIY
16425 COLLINS AVE
1815
SUNNY ISLES BEACH, FL 33160 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 AUTHORIZED MEMBER
Name SHOLOSHEK, VITALIY
Address 16425 COLLINS AVE
1815
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title AUTHORIZED MEMBER
Name SHOLOSHEK, INNA
Address 16425 COLLINS AVE
1815
City-State-Zip: SUNNY ISLES BEACH FL 33160

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: VITALIY SHOLOSHEK

AMBR

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date