

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000127270

Entity Name: GABRIELA OLAVES ESTHETICS STUDIO LLC

Current Principal Place of Business:

900 E OSCEOLA PKWY
KISSIMMEE, FL 34744

Current Mailing Address:

1314 SANTA ROSA DR
APT 304
KISSIMMEE, FL 34741 US

FEI Number: 84-1847323

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLAVES, GABRIELA P SR
900 E OSCEOLA PKWY
KISSIMMEE, FL 34744 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	Title	MANAGER
Name	OLAVES, GABRIELA P SR	Name	LARREAL, LARRY G SR
Address	1314 SANTA ROSA DR APT 304	Address	1314 SANTA ROSA DR APT 304
City-State-Zip:	KISSIMMEE FL 34741	City-State-Zip:	KISSIMMEE FL 34741

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: GABRIELA OLAVES

MGR

03/21/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date