

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000294909

Entity Name: LASER PAIN RELIEF CENTERS OF AMERICA LLC

Current Principal Place of Business:

245 GREYMON DR
WEST PALM BEACH, FL 33405

Current Mailing Address:

245 GREYMON DR
WEST PALM BEACH, FL 33405 US

FEI Number: 84-3949217

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COREN, BRUCE
245 GREYMON DR
WEST PALM BEACH, FL 33405 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 AMBR
Name COREN, BRUCE
Address 245 GREYMON DR
City-State-Zip: WEST PALM BEACH FL 33405

Title AMBR
Name COSTELLO, JOSEPH
Address 245 GREYMON DR
City-State-Zip: WEST PALM BEACH FL 33405

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: BRUCE COREN

CEO

03/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date