

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000001375

Entity Name: BODY METAMORPHOSIS LLC

Current Principal Place of Business:

2039 2ND AVE N
ST PETERSBURG, FL 33713

Current Mailing Address:

2039 2ND AVE N
ST PETERSBURG , FL 33713 US

FEI Number: 84-4145184

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHITE, JACOB
2039 2ND AVE N
ST PETERSBURG , FL 33713 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 OWNER
Name WHITE, JACOB R
Address 2039 2ND AVE N
City-State-Zip: ST PETERSBURG FL 33713

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: JACOB WHITE

OWNER

04/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date