

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000062557

**Entity Name:** PARAISO ANESTHESIA & COSMETICS SERVICES LLC

**Current Principal Place of Business:**

300 GALEN DR  
#406  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

PO BOX 403244  
MIAMI BEACH, FL 33140 US

**FEI Number:** 84-4935276

**Certificate of Status Desired:** No

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

MESAS, ANA MARIA  
1952 SW 22ND TERRACE  
MIAMI , FL 33145 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 MESAS, ANA MARIA  
Address PO BOX 403244  
City-State-Zip: MIAMI BEACH FL 33140

*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:** ANA MARIA MESAS

04/04/2024

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

\_\_\_\_\_  
Date