## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000298633

Entity Name: PURE MED SPA & JUICE BAR LLC

**Current Principal Place of Business:** 

60 WESTWARD DR.

MIAMI SPRINGS, FL 33166

**Current Mailing Address:** 

60 WESTWARD DR.

MIAMI SPRINGS. FL 33166

FEI Number: 85-3276177 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CABRERA, AILEEN 1016 MEADOWLARK AVE MIAMI SPRINGS , FL 33166 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

FILED Mar 25, 2025

**Secretary of State** 

2346153089CC

## Authorized Person(s) Detail:

Title OWNER

Name CABRERA , AILEEN
Address 60 WESTWARD DR.

City-State-Zip: MIAMI SPRINGS FL 33166

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: AILEEN CABRERA

Electronic Signature of Signing Authorized Person(s) Detail

03/25/2025

**OWNER** 

Date