

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000390260

**Entity Name:** BODY REHAB BY B, LLC

**Current Principal Place of Business:**

6701 BRYAN DAIRY ROAD  
APT 102  
LARGO, FL 33777

**Current Mailing Address:**

C/O PO BOX 794  
LARGO, FL 33779 US

**FEI Number:** 85-4345225

**Certificate of Status Desired:** No

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

HERBERT JAMES ROGERS JR TRUST  
6701 BRYAN DAIRY ROAD  
APT 102  
LARGO, FL 33777 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:** BY: HERBERT-JAMES: ROGERS, JR., AGENT

09/20/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           BIANCA FLORINE ANNIE ROGERS  
                  TRUST  
Address       6701 BRYAN DAIRY ROAD  
                  APT 102  
City-State-Zip: LARGO FL 33777

Title           AUTHORIZED REPRESENTATIVE  
Name           ROGERS, BIANCA  
Address       C/O PO BOX 794  
City-State-Zip: LARGO FL 33779

*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:** BIANCA ROGERS

**AUTHORIZED  
REPRESENTATIVE**

09/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date