

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000033330

Entity Name: LENS MAGIC PRO LLC**Current Principal Place of Business:**3285 LAKE WORTH RD
STE G
PALM SPRINGS, FL 33461**Current Mailing Address:**3285 LAKE WORTH RD
STE G
PALM SPRINGS, FL 33461 US**FEI Number:** 86-2170705**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**JOLIVERT, GUY R
6198 FOREST HILL BLVD
APT 103
WEST PALM BEACH, FL 33415 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	PRESIDENT, OWNER
Name	JOLIVERT, GUY R
Address	6198 FOREST HILL BLVD 103
City-State-Zip:	WEST PALM BEACH FL 33415

Title	MGR
Name	CHARLES, DORIANE FARAH
Address	6198 FOREST HILL BLVD 103
City-State-Zip:	WEST PALM BEACH FL 33415

Title	VP
Name	FALONE, JOLIVERT A
Address	3285 LAKE WORTH RD STE G
City-State-Zip:	PALM SPRINGS FL 33461

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: GUY R. JOLIVERT

OWNER

05/01/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date