

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000472604

**Entity Name:** AJA SPA LLC

**Current Principal Place of Business:**

700 E ATLANTIC BLVD  
SUITE 103  
POMPANO BEACH, FL 33060

**Current Mailing Address:**

700 E ATLANTIC BLVD  
SUITE 103  
POMPANO BEACH, FL 33060 UN

**FEI Number:** 87-3403102

**Certificate of Status Desired:** No

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

AJA, LINDETE  
700 E ATLANTIC BLVD  
SUITE 103  
POMPANO BEACH, FL 33060 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 AMBR  
Name AJA, LINDETE  
Address 1630 NE 35TH ST  
City-State-Zip: POMPAN0 BEACH FL 33064

*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:** AJA , LINDETE

AMBR

04/14/2025

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

\_\_\_\_\_  
Date