

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000206594

**FILED  
Apr 10, 2025  
Secretary of State  
2590566984CC**

**Entity Name:** VITAL FLOW WELLNESS AND AESTHETICS LLC

**Current Principal Place of Business:**

9841 DOMINICAN DR  
CUTLER BAY, FL 33189

**Current Mailing Address:**

9841 DOMINICAN DR  
CUTLER BAY, FL 33189

**FEI Number:** 88-2385351

**Certificate of Status Desired:** Yes

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

IGLESIAS, JESSICA  
9841 DOMINICAN DR  
CUTLER BAY, FL 33189 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 IGLESIAS, JESSICA  
Address 9841 DOMINICAN DR  
City-State-Zip: CUTLER BAY FL 33189

Title AMBR  
Name ROSE SOCARRAS, KATHERINE  
Address 9841 DOMINICAN DR  
City-State-Zip: CUTLER BAY FL 33189

Title AUTHORIZED MEMBER  
Name SOCARRAS, JORGE FELIX  
Address 9841 DOMINICAN DR  
City-State-Zip: CUTLER BAY FL 33189

*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:** JESSICA IGLESIAS

**PRESIDENT**

**04/10/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date