

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000209718

**Entity Name:** WAX YOU CENTER LLC

**Current Principal Place of Business:**

240 NORTH ORLANDO AV  
STE 1  
WINTER PARK, FL 32789

**Current Mailing Address:**

240 NORTH ORLANDO AV  
STE 1  
WINTER PARK, FL 32789 US

**FEI Number:** 99-2959211

**Certificate of Status Desired:** Yes

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

TEIXEIRA SULLIVAN, FRANCILANE M.  
240 NORTH ORLANDO AV  
WINTER PARK, FL 32789 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            TEIXEIRA SULLIVAN, FRANCILANE M.  
Address        1319 LAKE BALDWIN LN UNIT 103  
City-State-Zip: ORLANDO FL 32814

*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:** TEIXEIRA SULLIVAN , FRANCILANE M.

AMBR

04/24/2025

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

\_\_\_\_\_  
Date