

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000348387

**Entity Name:** SAHIR BEAUTY LLC

**Current Principal Place of Business:**

2335 TAMiami TRAIL N SUITE 208-3  
NAPLES, FL 34103

**Current Mailing Address:**

8910 WILLIAMS CIR  
UNIT 4210  
NAPLES, FL 34120 UN

**FEI Number:** 99-4514492

**Certificate of Status Desired:** No

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

ACOSTA, ZORAIDA  
8910 WILLIAMS CIR UNIT  
UNIT 4210  
NAPLES, FL 34120 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            OWNER  
Name            ACOSTA, ZORAIDA  
Address        8910 WILLIAMS CIR  
                  UNIT 4210  
City-State-Zip: NAPLES    34120

*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:** ZORAIDA ACOSTA

OWNER

04/23/2025

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

\_\_\_\_\_  
Date