

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000059078

Entity Name: BELLA'S DREAM SKIN INC.**Current Principal Place of Business:**1858 CROSSROADS BOULEVARD
WINTER HAVEN, FL 33881**Current Mailing Address:**1858 CROSSROADS BOULEVARD
WINTER HAVEN, FL 33881 US**FEI Number:** 88-3641866**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ZENBUSINESS INC.
336 E. COLLEGE AVE.
SUITE 301
TALLAHASSEE, FL 32301 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:** KHADIJEH HEMMATI

03/29/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREA
Name	ARANGO, ISABELLA
Address	1858 CROSSROADS BOULEVARD
City-State-Zip:	WINTER HAVEN FL 33881

Title	DIRE
Name	ARANGO, ISABELLA
Address	1858 CROSSROADS BOULEVARD
City-State-Zip:	WINTER HAVEN FL 33881

Title	PRES
Name	ARANGO, ISABELLA
Address	1858 CROSSROADS BOULEVARD
City-State-Zip:	WINTER HAVEN FL 33881

Title	SECR
Name	ARANGO, ISABELLA
Address	1858 CROSSROADS BOULEVARD
City-State-Zip:	WINTER HAVEN FL 33881

Title	DIRE
Name	GRANGER, JOHN H
Address	1858 CROSSROADS BOULEVARD
City-State-Zip:	WINTER HAVEN FL 33881

Title	DIRE
Name	GRANGER, CLAUDIA
Address	1858 CROSSROADS BOULEVARD
City-State-Zip:	WINTER HAVEN FL 33881

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ISABELLA ARANGO**MEMBER**

03/29/2024

Electronic Signature of Signing Officer/Director Detail

Date