T HALLA	G., D.D.S. ANDALE BEACH BOULEVARD . 33009 US	
named en	ntity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of F	loria
URE:	BRUCE G. JACOBS, DDS	(

### 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 566928** 

Entity Name: BRUCE G. JACOBS, D.D.S., P.A.

### **Current Principal Place of Business:**

1708 E HALLANDALE BEACH BLVD HALLANDALE BEACH, FL 33009

### **Current Mailing Address:**

1708 E HALLANDALE BEACH BLVD HALLANDALE BEACH. FL 33009

## FEI Number: 59-1799505

### Name and Address of Current Registered Agent:

JACOBS, B 1708 EAST HALLANDA

The above na ida.

	SIGNATURE:	BRUCE G. JACOBS, DDS			02/04/2020
		Electronic Signature of Registered Agent			Date
Officer/Director Detail :					
	Title	PD	Title	MANAGER	
	Name	JACOBS, BRUCE G., D.D.S.	Name	PRATTAS, HEATHER	
	Address	1708 E. HALLANDALE BCH	Address	1708 E HALLANDALE BEACH BL	VD
	City-State-Zip:	HALLANDALE FL 33009	City-State-Zip:	HALLANDALE BEACH FL 33009	

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: BRUCE JACOBS, DDS

PRESIDENT

02/04/2020

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Feb 04, 2020 Secretary of State 3017954143CC

Certificate of Status Desired: No