SIGNATURE: GARY R WEIDER

above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 601500

Entity Name: GARY R. WEIDER, D.M.D., P.A.

Current Principal Place of Business:

21355 EAST DIXIE HWY #105 AVENTURA, FL 33180

Current Mailing Address:

21355 EAST DIXIE HWY #105 AVENTURA, FL 33180

FEI Number: 59-1273523

Name and Address of Current Registered Agent:

WEIDER, GARY R., D.M.D. 21355 EAST DIXIE HWY #105 AVENTURA, FL 33180 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

Officer/Director Detail :

Title	PDT	Title	S
Name	WEIDER, GARY R	Name	WEIDER, ILEANA S
Address	21355 E DIXIE HWY #105	Address	21355 E DIXIE HWY, #105
City-State-Zip:	MIAMI FL 33180	City-State-Zip:	AVENTURA FL 33180

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

PRESIDENT 04/06/2020

FILED Apr 06, 2020 Secretary of State 6645664659CC

Certificate of Status Desired: No

Date

Date