

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K20967

Entity Name: GARAZI PERIODONTICS AND DENTAL IMPLANTS, P.A.**Current Principal Place of Business:**20800 WEST DIXIE HIGHWAY
MIAMI, FL 33180**Current Mailing Address:**20800 WEST DIXIE HIGHWAY
MIAMI, FL 33180 US**FEI Number:** 65-0043382**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GARAZI, DAVID M
20800 WEST DIXIE HIGHWAY
MIAMI, 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_____
Date**Officer/Director Detail :**

Title	VP
Name	GARAZI, ISAAC
Address	20800 WEST DIXIE HIGHWAY
City-State-Zip:	MIAMI FL 33180
Title	TREASURER
Name	MAUTNER GARAZI, ANA MARIA
Address	20800 W DIXIE HWY
City-State-Zip:	MIAMI FL 33180

Title	PRES
Name	GARAZI, DAVID M
Address	20800 WEST DIXIE HIGHWAY
City-State-Zip:	MIAMI FL 33180
Title	SECRETARY
Name	GARAZI, DAVID M
Address	20800 W. DIXIE HWY
City-State-Zip:	MIAMI 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 above, or on an attachment with all other like empowered.

SIGNATURE: ISAAC GARAZI

VICE PRESIDENT

02/04/2023

Electronic Signature of Signing Officer/Director Detail_____
Date