

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000033983

Entity Name: WESTON FAMILY DENTAL CENTER, INC.

Current Principal Place of Business:

1350 S.W. 160TH AVE.
WESTON, FL 33326

Current Mailing Address:

1350 S.W. 160TH AVE.
WESTON, FL 33326

FEI Number: 05-0560957

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIFILIPPO, STEVEN
1350 SW 160TH AVE
WESTON, FL 33326 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 PT
Name DIFILIPPO, STEVEN
Address 8738 CARAWAY LAKE COURT
City-State-Zip: BOYNTON BEACH FL 33473

Title VS
Name SEVEL, DENNIS
Address 101 S FT. LAUDERDALE BEACH BLVD
805
City-State-Zip: FT LAUDERDALE FL 33316

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: STEVEN DIFILIPPO

PRESIDENT

04/18/2017

Electronic Signature of Signing Officer/Director Detail

Date