

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000165951

Entity Name: THE DENTAL PLACE INC.

Current Principal Place of Business:

6738 W SUNRISE BLVD
SUITE #105
PLANTATION, FL 33313

Current Mailing Address:

5607 NW 125 AVE
CORAL SPRINGS, FL 33076 US

FEI Number: 20-3791829

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBINSON, SHARON O DR.
5607 NW 125 AVE
CORAL SPRINGS, FL 33076 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: SHARON ROBINSON

04/02/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP
Name	ROBINSON, SHARON O. DR.	Name	ROBINSON, LORNA Y
Address	5607 NW 125 AVE	Address	5607 NW 125 AVE
City-State-Zip:	CORAL SPRINGS FL 33076	City-State-Zip:	CORAL SPRINGS FL 33076

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: SHARON ROBINSON

DOCTOR

04/02/2018

Electronic Signature of Signing Officer/Director Detail

Date