

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000047686

Entity Name: MARIA GABRIELA MANTELLINI, D.D.S., P.A.

Current Principal Place of Business:

4016 SAPPHIRE COVE
WESTON, FL 33331

Current Mailing Address:

4016 SAPPHIRE COVE
WESTON, FL 33331 US

FEI Number: 20-4648234

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MANTELLINI, MARIA G
4016 SAPPHIRE COVE
WESTON, FL 33331 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 P
Name MANTELLINI, MARIA G
Address 4016 SAPPHIRE COVE
City-State-Zip: WESTON FL 33331

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: MARIA GABRIELA MANTELLINI

PRESIDENT

02/23/2014

Electronic Signature of Signing Officer/Director Detail

Date