

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000033661

**Entity Name:** KENDALL DENTAL CARE,INC.

**Current Principal Place of Business:**

12350 SW 127 AVE  
MIAMI, FL 33186

**Current Mailing Address:**

12350 SW 127 AVE  
MIAMI, FL 33186

**FEI Number:** 20-8660953

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CLARO, RITA M  
118 ZAMORA  
APT 301  
CORAL GABLES, FL 33134 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 CLARO, RITA DDS  
Address 118 ZAMORA  
APT 301  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name ACOSTA, HECTOR M  
Address 118 ZAMORA  
APT 301  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name CLARO, EMILIO E  
Address 8415 SW 107 AVE STE 371W  
City-State-Zip: MIAMI FL 33173

*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:** HECTOR M ACOSTA

VP

01/25/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date