## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000041653

Entity Name: PALM BEACH MALL DENTAL, P.A.

**Current Principal Place of Business:** 

4288 OKEECHOBEE BLVD D/B/A CROSS COUNTY DENTAL WEST PALM BCH, FL 33409

## **Current Mailing Address:**

C/O ROSTISLAV KRASNOV, DDS 333 SE 2ND AVE SUITE 2520 MIAMI, FL 33131 US

FEI Number: 51-0633186 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DENTMALL MSO, LLC C/O ROSTISLAV KRASNOV, DDS 333 SE 2ND AVE SUITE 2520 MIAMI, FL 33131 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: ROSTISLAV KRASNOV 03/11/2015

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

Title DP

Name KRASNOV, ROSTISLAV Address 17555 COLLINS AVE

**SUITE 2401** 

City-State-Zip: SUNNY ISLES BEACH FL 33160

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: ROSTISLAV KRASNOV

**OWNER** 

FILED Mar 11, 2015

**Secretary of State** 

CC9002269866

Date

03/11/2015