## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000088024

Entity Name: DENTAL HYGIENE SEMINARS, INC.

**Current Principal Place of Business:** 

265 BONCYLE LAND DRIVE EASTPOINT. FL 32328

**Current Mailing Address:** 

265 BONCYLE LAND DRIVE EASTPOINT, FL 32328

FEI Number: 26-0751046 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAPP, HEATHER O 265 BONSYLE LAND DRIVE EASTPOINT, FL 32328 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

FILED Jan 30, 2018

**Secretary of State** 

CC5480187446

Officer/Director Detail:

Title VD Title PD

NameKOLE, PETER DR.NameMAPP, HEATHER ODR.Address265 BONSYLE LAND DRIVEAddress265 BONSYLE LAND DRIVE

City-State-Zip: EASTPOINT FL 32328 City-State-Zip: EASTPOINT FL 32328

Title ST

Name KOLE, PETER DR.

Address 265 BONSYLE LAND DRIVE City-State-Zip: EASTPOINT FL 32328

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: HEATHER O. MAPP

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

01/30/2018 Date

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