## 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000113940

Entity Name: DENT PROFESSIONAL SOLUTION, INC.

# **Current Principal Place of Business:**

8201 NW 8 STREET # 209 MIAMI, FL 33126

# **Current Mailing Address:**

**8201 NW 8 STREET** # 209 MIAMI, FL 33126 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DELGADO, JUAN C 8321 NW 7 STREET APT. 308 MIAMI, FL 33126 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** Apr 09, 2013

**Secretary of State** 

CC8640783676

#### Officer/Director Detail:

Title

MARTINEZ, JOSE Name **8201 NW 8 STREET** Address City-State-Zip: MIAMI FL 33126

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.