2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2019
Secretary of State
5403579233CC

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Entity Name: ESTHETIC DENTAL CLINIC INC.

Current Principal Place of Business:

3735 SW 8TH STREET SUITE 202
MIAMI, FL 33134

Current Mailing Address:

3735 SW 8TH STREET SUITE 202
MIAMI, FL 33134

FEI Number: 26-4625938

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HECHAVARRIA, ILVAIN RSR
3735 SW 8 ST
SUITE 202
MIAMI, 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	P	Title	V
Name	SARDUY, LUIS ODDS	Name	CARBONERO, AICEL DDS
Address	3735 SW 8 ST SUITE 202	Address	3735 SW 8 ST SUITE 202
City-State-Zip:	MIAMI FL 33134	City-State-Zip:	MIAMI FL 33134
Title	ST	Title	VP
Name	HECHAVARRIA, CARIDAD	Name	HECHAVARRIA, ILVAIN RSR
Address	3735 SW 8 STREET # 202	Address	3737 SW 8TH STREET SUITE 202
City-State-Zip:	MIAMI FL 33134	City-State-Zip:	MIAMI FL 33134

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: ILVAIN R HECHAVARRIA VP 03/07/2019

Electronic Signature of Signing Officer/Director Detail — Date