2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2014
Secretary of State
CC7437502697

DOCUMENT# P10000055616

Entity Name: LEGACY DENTAL, PA

Current Principal Place of Business:

4993 WEST ATLANTIC AVE
SUITE 7D
DELRAY BEACH, FL 33445

Current Mailing Address:

4993 WEST ATLANTIC AVE
SUITE 7D
DELRAY BEACH, FL 33445

FEI Number: 80-0644200

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

URBINO, RAFAEL
4993 W. ATLANTIC AVE
SUITE 7D
DELRAY BEACH, FL 33445 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	PRESIDENT
Name	URBINO, RAFAEL DMD
Address	4993 WEST ATLANTIC AVE SUITE 7D
City-State-Zip:	DELRAY BEACH FL 33445

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: RAFAEL URBINO PRESIDENT 03/03/2014

Electronic Signature of Signing Officer/Director Detail — Date