

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000070126

**Entity Name:** NATHALIE VERA, D.M.D., P.A.

**Current Principal Place of Business:**

2740 E. COMMERCIAL BLVD  
FT LAUDERDALE, FL 33308

**Current Mailing Address:**

3217 NE 13 ST  
APT 105  
POMPANO BEACH, FL 33062 US

**FEI Number:** 27-3347148

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VERA, NATHALIE DR.  
2740 E. COMMERCIAL BLVD  
FT LAUDERDALE, FL 33308 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 CEO  
Name VERA, NATHALIE DMD DR.  
Address 3217 NE 13 ST  
APT 105  
City-State-Zip: POMPAN BEACH FL 33062

*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:** NATHALIE VERA

DMD

01/28/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date