

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000070126

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

**Current Principal Place of Business:**

712 SW 22ND AVE  
FT LAUDERDALE, FL 33312

**Current Mailing Address:**

712 SW 22ND AVE  
FT LAUDERDALE, FL 33312

**FEI Number:** 27-3347148

**Certificate of Status Desired:** No

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

VERA, NATHALIE DR.  
712 SW 22 AVE  
FORT LAUDERDALE, FL 33312 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 D  
Name VERA, NATHALIE DMD  
Address 712 SW 22ND AVE  
City-State-Zip: FT LAUDERDALE FL 33312

*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

DR

01/26/2013

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

\_\_\_\_\_  
Date