

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000099593

**Entity Name:** NEW IMAGE DENTISTRY OF BEACHSIDE, INC.

**Current Principal Place of Business:**

660 EAST EAU GALLIE BLVD.  
INDIAN HARBOUR BEACH, FL 32937

**Current Mailing Address:**

7827 N. WICKHAM ROAD  
SUITE C  
MELBOURNE, FL 32940 US

**FEI Number:** 27-4195408

**Certificate of Status Desired:** No

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

SCHILLINGER, CHARLES A ESQ.  
1311 BEDFORD DRIVE  
MELBOURNE, FL 32940 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:** CHARLES A. SCHILLINGER, ESQ

04/21/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PSTD  
Name MUJEEB, MOHAMMED  
Address 7827 N. WICKHAM ROAD, SUITE C  
City-State-Zip: MELBOURNE FL 32940

*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:** MOHAMMED MUJEEB

PRESIDENT

04/21/2017

Electronic Signature of Signing Officer/Director Detail

Date