

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000045672

**Entity Name:** SOUTHLAND MALL DENTAL, P.A.

**Current Principal Place of Business:**

20505 SOUTH DIXIE HWY  
MIAMI, FL 33189

**Current Mailing Address:**

20505 SOUTH DIXIE HWY  
MIAMI, FL 33189

**FEI Number: 45-2383553**

**Certificate of Status Desired: No**

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

KRASNOV, ROSTISLAV DDS  
20505 SOUTH DIXIE HWY  
MIAMI, FL 33189 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            KRASNOV, ROSTISLAV DDS  
Address        230 WEST 56TH ST, APT 52F  
City-State-Zip: NEW YORK NY 10019

Title            D  
Name            VALDMAN, VADIM DDS  
Address        1830 SOUTH OCEAN DR, APT 2411  
City-State-Zip: HALLENDALE FL 33009

*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: ROSTISLAV KRASNOV**

**PRES**

**03/19/2014**

Electronic Signature of Signing Officer/Director Detail

Date