## **2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000068743

Entity Name: GEMINI DENTAL, P.A.

**Current Principal Place of Business:** 

10449 NW 41ST ST MIAMI, FL 33178

**Current Mailing Address:** 

10449 NW 41ST ST MIAMI. FL 33178

FEI Number: 45-3060282 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VELIS, LUIS A 10449 NW 41ST ST MIAMI, FL 33178 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

**FILED** Apr 25, 2014

**Secretary of State** 

CC4222604762

## Officer/Director Detail:

Title

Name VELIS, LUIS A Address 10449 NW 41ST ST

City-State-Zip: MIAMI FL 33178

SIGNATURE: LUIS A. VELIS

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.

DR.

Electronic Signature of Signing Officer/Director Detail

04/25/2014

Date