

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000091392

**Entity Name:** MIREYA TOQUICA DMD PA.

**Current Principal Place of Business:**

2955 NW 126TH AVE  
105  
SUNRISE, FL 33323

**Current Mailing Address:**

2955 NW 126 TH AVE  
105  
SUNRISE, FL 33323 US

**FEI Number:** 45-3640040

**Certificate of Status Desired:** No

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

MONTES, JOSE E  
6380 BELLA CIRCLE  
903  
BOYNTON BEACH, FL 33437 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	P
Name	TOQUICA, ZAYDE M
Address	2955 NW 126TH AVE 105
City-State-Zip:	SUNRISE FL 33323

*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:** ZAYDE M TOQUICA

**PRESIDENT**

**03/01/2014**

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

\_\_\_\_\_  
Date