

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000000841

Entity Name: ALTAMONTE MALL DENTAL, P.A.

Current Principal Place of Business:

451 EAST ALTAMONTE DRIVE
SUITE 1279
ALTAMONTE SPRINGS, FL 32701

Current Mailing Address:

C/O ROSTISLAV KRASNOV, DDS
333 SE 2ND AVE SUITE 2520
MIAMI, FL 33131 US

FEI Number: 45-4194371

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRASNOV, ROSTISLAV
C/O ROSTISLAV KRASNOV, DDS
333 SE 2ND AVE SUITE 2520
MIAMI, FL 33131 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: ROSTISLAV KRASNOV

02/10/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name KRASNOV, ROSTISLAV DDS
Address 17749 COLLINS AVENUE
SUITE 2902
City-State-Zip: SUNNY ISLES BEACH FL 33160

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

02/10/2019

Electronic Signature of Signing Officer/Director Detail

Date