

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000005806

**Entity Name:** TOP CHOICE DENTISTRY P.A.

**Current Principal Place of Business:**

816 WORTHMORE AVE  
LAKE WORTH, FL 33460

**Current Mailing Address:**

816 WORTHMORE AVE  
LAKE WORTH, FL 33460

**FEI Number:** 46-2030682

**Certificate of Status Desired:** No

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

MESA, TAHIMARA  
816 WORTHMORE AVE  
LAKE WORTH, FL 33460 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:** TAHIMARA MESA

06/27/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name MESA, TAHIMARA  
Address 816 WORTHMORE AVE  
City-State-Zip: LAKE WORTH FL 33460

*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:** TAHIMARA MESA

OWNER

06/27/2018

Electronic Signature of Signing Officer/Director Detail

Date