## **2014 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:

PERES, 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:

Electronic Signature of Registered Agent

Date

FILED Mar 14, 2014

**Secretary of State** 

CC0618128929

## Officer/Director Detail:

Title F

Name PEREZ, 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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: TAHIMARA PEREZ

**PRESIDENT** 

03/14/2014

Date