

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000089280

Entity Name: 4 STAR DENTAL EQUIPMENT, INC.

Current Principal Place of Business:

5656 ISABELLE AVE
SUITE 4
PORT ORANGE, FL 32119

Current Mailing Address:

5656 ISABELLE AVE
SUITE 4
PORT ORANGE, FL 32119 US

FEI Number: 20-4319026

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHEEHAN ASSOCIATES
290 - B NORTH US HIGHWAY 1
ORMOND BEACH, FL 32174 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 CEO, PRESIDENT
Name LAMICA, JOSEPH L
Address 5656 ISABELLE AVE
 SUITE 4
City-State-Zip: PORT ORANGE FL 32119

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: JOSEPH LAMICA

PRESIDENT & CEO

03/03/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date