# 2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000089280

Entity Name: 4 STAR DENTAL EQUIPMENT, INC.

# **Current Principal Place of Business:**

5889 S. WILLIAMSON BLVD SUITE 1415 225 PORT ORANGE, FL 32128

# **Current Mailing Address:**

5889 S. WILLIAMSON BLVD SUITE 1415 225 PORT ORANGE, FL 32128 US

## FEI Number: 20-4319026

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

4 STAR DENTAL EQUIPMENT, INC. 5889 S. WILLIAMSON BLVD SUITE 1415 225 PORT ORANGE, FL 32128 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: JOSEPH LAMICA

Electronic Signature of Registered Agent

## **Officer/Director Detail :**

Title	CEO, PRESIDENT
Name	LAMICA, JOSEPH L
Address	5889 S. WILLIAMSON BLVD SUITE 1415 225
City-State-Zip:	PORT ORANGE FL 32128

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.

PRESIDENT

SIGNATURE: JOSEPH LAMICA

Electronic Signature of Signing Officer/Director Detail

# FILED Apr 29, 2019 Secretary of State 0724581466CC

Certificate of Status Desired: Yes

04/29/2019

Date

Date

04/29/2019