## 2017 FLORIDA PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P14000055255

Entity Name: ISMILE DENTISTRY, PA

**Current Principal Place of Business:** 

8130 W WATERS AVENUE 200B

TAMPA, FL 33615

**Current Mailing Address:** 

3419 W SAN LUIS ST TAMPA, FL 33629 US

FEI Number: 47-1203855 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOUIS, SALWAN 8130 W WATERS AVE 200B TAMPA FL 33615 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: SALWAN LOUIS 10/28/2017

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title D Title [

Name LUGO, FRANCIS Name LOUIS, SALWAN

Address 8130 W WATERS AVE STE 200B Address 8130 W WATERS AVE STE 200B

City-State-Zip: TAMPA FL 33615 City-State-Zip: TAMPA FL 33615

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** 

Electronic Signature of Signing Officer/Director Detail

FILED Oct 28, 2017

**Secretary of State** 

CR9702195985