

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000084384

Entity Name: HEALTHY FAMILY DENTAL INCORPORATED

Current Principal Place of Business:

5376 W 16 AVE
HIALEAH, FL 33012

Current Mailing Address:

5376 W 16 AVE
HIALEAH, FL 33012

FEI Number: 47-3833178

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MANNS, RENATE
5376 W 16 AVE
HIALEAH, FL 33012 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: RENATE MANNS

04/27/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CFO
Name MANNS, RENATE E
Address 1030 N ROYAL POINCIANA BLVD
City-State-Zip: MIAMI SPRINGS FL 33166

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: RENATE MANNS

CFO

04/27/2015

Electronic Signature of Signing Officer/Director Detail

Date