

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000000643

Entity Name: DOG DENTAL CARE INC

Current Principal Place of Business:

2560 NW 42ND AVE
COCONUT CREEK, FL 33066

Current Mailing Address:

2560 NW 42ND AVE
COCONUT CREEK, FL 33066 US

FEI Number: 47-2686939

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BORTOLAZZO, DENITA
2560 NW 42ND AVE
COCONUT CREEK, FL 33066 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 P
Name BORTOLAZZO, DENITA
Address 2560 NW 42ND AVE
City-State-Zip: COCONUT CREEK FL 33066

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: DENITA BORTOLAZZO

PRESIDENT

03/07/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date