

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000073736

Entity Name: TURNER FAMILY AND COSMETIC DENTISTRY, P.A.

Current Principal Place of Business:

10165 MONTAGUE STREET
TAMPA, FL 33262

Current Mailing Address:

10165 MONTAGUE STREET
TAMPA, FL 33262

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAPLAN, JASON R ESQ.
900 OSCEOLA DRIVE
SUITE NO. 107C
WEST PALM BEACH, FL 33409 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 TURNER, OLAIFA DMD
Address 10165 MONTAGUE STREET
City-State-Zip: TAMPA FL 33262

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: DR. OLAIFA TURNER

PRESIDENT

04/17/2018

Electronic Signature of Signing Officer/Director Detail

Date