

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000078103

**Entity Name:** COMPLETE DENTAL SOURCE INC

**Current Principal Place of Business:**

3900 NW 79TH WAY  
HOLLYWOOD, FL 33024

**Current Mailing Address:**

3900 NW 79TH WAY  
HOLLYWOOD, FL 33024 US

**FEI Number:** 81-3963231

**Certificate of Status Desired:** No

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

CORMIER, ADRIANA  
3900 NW 79 WAY  
HOLLYWOOD, FL 33024 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 CORMIER, ADRIANA  
Address 3900 NW 79 WAY  
City-State-Zip: HOLLYWOOD FL 33024

*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:** ADRIANA CORMIER

**OWNER**

**04/25/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date