

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P18000017725

**Entity Name:** A-Z DENTAL INC.

**Current Principal Place of Business:**

7000 W 12TH AVENUE  
6  
HIALEAH, FL 33014

**Current Mailing Address:**

7000 W 12TH AVENUE  
6  
HIALEAH, FL 33014

**FEI Number:** 82-4535775

**Certificate of Status Desired:** Yes

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

BOBADILLA, PATRICIA  
2646 THOMAS ST  
HOLLYWOOD, FL 33020 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 BOBADILLA, PATRICIA  
Address 2646 THOMAS ST  
City-State-Zip: HOLLYWOOD FL 33020

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:** PATRICIA BOBADILLA

DDS

02/18/2020

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

\_\_\_\_\_  
Date