

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000092916

Entity Name: GENESIDENTALCARE, P.A.

Current Principal Place of Business:

9165 SW 87TH AVENUE
MIAMI, FL 33176

Current Mailing Address:

9165 SW 87TH AVENUE
MIAMI, FL 33176 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PELL, RICHARD
9165 SW 87TH AVENUE
MIAMI, FL 33176 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 PELL, LORENA
Address 9165 SW 87TH AVENUE
City-State-Zip: MIAMI FL 33176

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: LORENA PELL

DENTIST

01/17/2020

Electronic Signature of Signing Officer/Director Detail

Date