

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000007338

Entity Name: LOINES PINA D.D.S. PA

Current Principal Place of Business:

1570 W 43 PLACE, SUITE 38
HIALEAH, FL 33012

Current Mailing Address:

1570 W 43 PLACE, SUITE 38
HIALEAH, FL 33012 US

FEI Number: 83-3370185

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PINA, LOINES DDS
10345 SW 23 COURT
MIRAMAR, FL 33025 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 PINA, LOINES DDS
Address 10345 SW 23 COURT
City-State-Zip: MIRAMAR FL 33025

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: PINA , LOINES , DDS

P

04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date