## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P19000033377

Entity Name: LI'L SUNSHINE SMILES DENTISTRY, P.A.

**Current Principal Place of Business:** 

12950 RACETRACK RD **SUITE 109** TAMPA, FL 33626

## **Current Mailing Address:**

12950 RACETRACK RD **SUITE 109** TAMPA, FL 33626 US

FEI Number: 83-4489985 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

BOTERO, CATALINA 12950 RACETRACK RD SUITE 109 TAMPA, FL 33626 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: CATALINA BOTERO 04/03/2024

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title

BOTERO, CATALINA BOTERO, CATALINA Name Name 12950 RACETRACK RD 12950 RACETRACK RD Address Address

**SUITE 109 SUITE 109** 

City-State-Zip: TAMPA FL 33626 City-State-Zip: TAMPA FL 33626

Title S Title Т

Name BOTERO, CATALINA Name BOTERO, CATALINA Address

12950 RACETRACK RD Address 12950 RACETRACK RD **SUITE 109** 

**SUITE 109** 

City-State-Zip: TAMPA FL 33626 City-State-Zip: TAMPA FL 33626

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.

**FILED** Apr 03, 2024

**Secretary of State** 

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