

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20000003423

Entity Name: ROSE DENTAL CENTER, P.A.

Current Principal Place of Business:

2309 WEST MARTIN LUTHER KING, JR. BLVD.
STE. 1
TAMPA, FL 33607

Current Mailing Address:

2309 WEST MARTIN LUTHER KING, JR. BLVD.
STE. 1
TAMPA, FL 33607 US

FEI Number: 84-4957753

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ LAW GROUP
1000 N ASHLEY DR
SUITE 520
TAMPA, FL 33602 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 ROSE, RYAN N
Address 2309 WEST MARTIN LUTHER KING,
JR. BLVD.
City-State-Zip: TAMPA FL 33607

Title VP
Name ROSE, KATHERINE M
Address 2309 W. MARTIN LUTHER KING, JR.
BLVD.
City-State-Zip: TAMPA FL 33607

Title S
Name ROSE, KATHERINE M
Address 2309 W. MARTIN LUTHER KING, JR.
BLVD.
City-State-Zip: TAMPA FL 33607

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: RYAN ROSE

PRESIDENT

04/29/2024

Electronic Signature of Signing Officer/Director Detail

Date