

**2023 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P20000079824

**Entity Name:** THE DENTAL ASSISTING AND TEAM INSTITUTE, PA

**Current Principal Place of Business:**

9121 N MILITARY TRAIL  
209  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

4274 NORTHLAKE BLVD  
PALM BEACH GARDENS, FL 33410 US

**FEI Number: 86-1942751**

**Certificate of Status Desired: No**

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

RUDNICK, ANDREW  
4274 NORTHLAKE BLVD  
PALM BEACH GARDENS, FL 33410 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 DR  
Name RUDNICK, ANDREW  
Address 4274 NORTHLAKE BLVD  
City-State-Zip: PALM BEACH GARDENS FL 33410

*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: ANDREW RUDNICK**

**PRESIDENT**

**04/10/2023**

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

\_\_\_\_\_  
Date