

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000105140

**Entity Name:** FL SOUTHERN DENTAL AVENTURA P.A.

**Current Principal Place of Business:**

21355 E. DIXIE HWY 105  
AVENTURA, FL 33180

**Current Mailing Address:**

5830 GRANITE PARKWAY, SUITE780  
PLANO, TX 75024

**FEI Number:** 87-4095694

**Certificate of Status Desired:** No

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

DONNA, MOCH  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** \S\DONNA MOCH

02/06/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PSD  
Name WEIDER, GARY R D.M.D.  
Address 21355 E. DIXIE HWY 105  
City-State-Zip: AVENTURA FL 33180

*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:** WEIDER , GARY R , D.M.D.

PSD

02/06/2024

Electronic Signature of Signing Officer/Director Detail

Date