

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000005349

Entity Name: ANP SMILE CARE CORP

Current Principal Place of Business:

6720 SPRING MOSS PL
BRADENTON, FL 34202

Current Mailing Address:

6720 SPRING MOSS PL
BRADENTON, FL 34202 US

FEI Number: 87-4715787

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE FREITAS, PAULA C
6720 SPRING MOSS PL
BRADENTONS, FL 34202 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: PAULA DE FREITAS

01/15/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name DE FREITAS, PAULA C
Address 6720 SPRING MOSS PL
City-State-Zip: BRADENTON FL 34202

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: PAULA DE FREITAS

PRESIDENT

01/15/2023

Electronic Signature of Signing Officer/Director Detail

Date