

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000104299

Entity Name: EDSON G. BUSTAMANTE, D.M.D., P.A.

Current Principal Place of Business:

11944 SHELDON RD.
TAMPA, FL 33626

Current Mailing Address:

11944 SHELDON RD.
TAMPA, FL 33626

FEI Number: 59-3416339

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSTAMANTE, EDSON G
11944 SHELDON RD.
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: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PT
Name BUSTAMANTE, EDSON G
Address 11944 SHELDON ROAD
City-State-Zip: TAMPA FL 33626

Title VS
Name BUSTAMANTE, DONNA N
Address 11944 SHELDON RD.
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.

SIGNATURE: EDSON G BUSTAMANTE

OWNER

01/26/2017

Electronic Signature of Signing Officer/Director Detail

Date