

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000107053

**Entity Name:** YOLANDA CINTRON, D.M.D., P.A.

**Current Principal Place of Business:**

2021 E COMMERCIAL BLVD  
UNIT 208  
FT LAUDERDALE, FL 33308

**Current Mailing Address:**

2021 E COMMERCIAL BLVD  
UNIT 208  
FT LAUDERDALE, FL 33308

**FEI Number:** 65-0802993

**Certificate of Status Desired:** No

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

CINTRON, YOLANDA DMD  
2021 E COMMERCIAL BLVD  
UNIT 208  
FT LAUDERDALE, FL 33308 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 D  
Name CINTRON, YOLANDA  
Address 1930 SW 7TH ST  
City-State-Zip: BOCA RATON FL 33486

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:** YOLANDA CINTRON

**OWNER**

**03/24/2014**

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

\_\_\_\_\_  
Date