

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000047196

**Entity Name:** ALL ABOUT TEETH, LLC.

**Current Principal Place of Business:**

2301 NORTH UNIVERSITY DRIVE  
209  
PEMBROKE PINES, FL 33024

**Current Mailing Address:**

2301 NORTH UNIVERSITY DRIVE  
209  
PEMBROKE PINES, FL 33024 US

**FEI Number:** 27-2500645

**Certificate of Status Desired:** No

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

REYES, BARBARA  
2301 NORTH UNIVERSITY DIVE  
209  
PEMBROKE PINES, FL 33024 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

**Authorized Person(s) Detail :**

Title MGRM  
Name REYES, BARBARA  
Address 2301 NORTH UNIVERSITY DRIVE #209  
City-State-Zip: PEMBROKE PINES FL 33024

Title MGRM  
Name FERNANDEZ, ZULAY V  
Address 2301 NORTH UNIVERSITY DRIVE #209  
City-State-Zip: PEMBROKE PINES FL 33024

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BARBARA REYES

**MGRM**

**03/12/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date