

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000118828

**Entity Name:** AVM DENTAL ASSISTANT SCHOOL, LLC

**Current Principal Place of Business:**

220 MIRACLE MILE  
SUITE 228  
CORAL GABLES, FL 33134

**Current Mailing Address:**

220 MIRACLE MILE  
SUITE 228  
CORAL GABLES, FL 33134 US

**FEI Number:** 32-0423319

**Certificate of Status Desired:** No

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

AVM DENTISTRY  
220 MIRACLE MILE  
SUITE 228  
CORAL GABLES, FL 33134 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:** ANGEL VELAZQUEZ

01/31/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name VELAZQUEZ, ANGEL L. DMD  
Address 220 MIRACLE MILE  
STE 228  
City-State-Zip: CORAL GABLES FL 33134

*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:** ANGEL L. VELAZQUEZ

**PRESIDENT**

01/31/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date