## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000065481

Entity Name: SENNA DENTAL LAB. LLC

**Current Principal Place of Business:** 

2500 N UNIVERSITY DR.

R15

SUNRISE, FL 33322

**Current Mailing Address:** 

2500 N UNIVERSITY DR.

R15

SUNRISE, FL 33322 US

FEI Number: 82-4813881 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GFS TAX & ACCOUNTING SERVICES 2001 W CYPRESS CREEK RD 102B

FT LAUDERDALE, FL 33309 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

FILED Jan 22, 2020

**Secretary of State** 

8140042092CC

Authorized Person(s) Detail:

Title AMBR Title AMBR

Name PEREIRA, VALMOR Name PEREIRA, ROSELI C

Address 1963 NW136TH AVE AP #541 Address 1963 NW136TH AVE AP #541

City-State-Zip: SUNRISE FL 33323 City-State-Zip: SUNRISE FL 33323

Title T

Name HOBBS, EMMETT

Address 2500 N UNIVERSITY DR R15

City-State-Zip: SUNRISE FL 33322

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: PEREIRA , VALMOR

Electronic Signature of Signing Authorized Person(s) Detail

AMBR

01/22/2020