

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000161764

Entity Name: DENTAL MANAGEMENT GROUP, LLC

Current Principal Place of Business:

4000 SHERIDAN ST
SUITE B
HOLLYWOOD, FL 33021

Current Mailing Address:

4000 SHERIDAN ST
SUITE B
HOLLYWOOD, FL 33021

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IKROM, MAX
4000 SHERIDAN ST
SUITE B
HOLLYWOOD, FL 33021 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 MGR
Name IKROM, MAX MR
Address 2000 NW 100 AVE
City-State-Zip: PEMBROKE PINES FL 33021

Title MGR
Name GORODOVA, SVETLANA MS
Address 2291 NW 129 TERRACE
City-State-Zip: PEMBROKE PINES FL 33021

Title MGR
Name NELSON, DIAZ R MR
Address 7084 MARIPOSA CIRCLE CT
City-State-Zip: FORT LAUDERDALE FL 33331

Title MGR
Name GRISHIN, ALEXANDER
Address 4000 SHERIDAN ST
SUITE B
City-State-Zip: HOLLYWOOD FL 33021

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: MAX M IKROM R

MGR

01/09/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date