

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000074388

Entity Name: ODONTOPLUS LLC

Current Principal Place of Business:

19030 NW 10TH STREET
PEMBROKE PINES, FL 33029

Current Mailing Address:

19030 NW 10TH STREET
PEMBROKE PINES, FL 33029 US

FEI Number: 86-2040100

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIMONPIETRI, FRANCOIS MR
19030 NW 10TH STREET
PEMBROKE PINES, FL 33029 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 AMBR
Name SIMONPIETRI, FRANCOIS MR
Address 19030 NW 10TH STREET
City-State-Zip: PEMBROKE PINES FL 33029

Title AMGR
Name TESORO BORGES, LUDMILA MS
Address 19030 NW 10TH STREET
City-State-Zip: PEMBROKE PINES FL 33029

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: FRANCOIS SIMONPIETRI

MANAGER

01/18/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date