

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000007734

**Entity Name:** MIAMI DADE DENTAL SOCIETY, INC.

**Current Principal Place of Business:**

420 S. DIXIE HIGHWAY #2E  
CORAL GABLES, FL 33146

**Current Mailing Address:**

420 S. DIXIE HIGHWAY #2E  
CORAL GABLES, FL 33146

**FEI Number:** 27-0740253

**Certificate of Status Desired:** No

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

LEON, ESTEBAN DR.  
6061 COLLINS AVE  
21D  
MIAMI BEACH, FL 33140 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:** ESTEBAN LEON

04/29/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LEON, ESTEBAN  
Address        6061 COLLINS AVE  
                  21D  
City-State-Zip: MIAMI BEACH FL 33140

Title            VP  
Name            ALEXANDRA, CASTILLO B  
Address        4251 SALZEDO ST  
                  614  
City-State-Zip: CORAL GABLES FL 33146

Title            TREASURER  
Name            ROMANO, RODRIGO  
Address        7701 SW 62ND AVE  
                  A-1  
City-State-Zip: SOUTH MIAMI FL 33143

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RODRIGO ROMANO

DMD, MSC

04/29/2014

Electronic Signature of Signing Officer/Director Detail

Date