

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F61860

Entity Name: MANUEL E. COSTA, D.D.S., P.A.

Current Principal Place of Business:

791 E 48 ST
HIALEAH, FL 33013

Current Mailing Address:

791 E 48 ST
HIALEAH, FL 33013

FEI Number: 59-2240482

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COSTA D.D.S., MANUEL E.
791 E 48 ST
HIALEAH, FL 33013 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

Officer/Director Detail :

Title DPTS
Name COSTA D.D.S., MANUEL E.
Address 791 E. 48TH STREET
City-State-Zip: HIALEAH FL

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MANUEL E COSTA DDS

04/30/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date