

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H23426

**Entity Name:** ALLAN MOSKOW, D.D.S., P.A.

**Current Principal Place of Business:**

2240 WOOLBRIGHT ROAD  
SUITE 410  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

% ALLAN MOSKOW  
12500 OAK ARBOR LN.  
BOYNTON BCH., FL 33436

**FEI Number:** 59-2452693

**Certificate of Status Desired:** Yes

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

MOSKOW, ALLAN  
12500 OAK ARBOR LN  
BOYNTON BEACH, FL 33436 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 PD  
Name MOSKOW, ALLAN  
Address 12500 OAK ARBOR LN  
City-State-Zip: BOYNTON BEACH FL 33436

*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:** ALLAN MOSKOW DDS

PD

01/26/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date