

**2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000008404

**Entity Name:** J M DENTAL GROUP, INC.

**Current Principal Place of Business:**

1470 N.W. 107TH AVENUE  
SUITE F  
MIAMI, FL 33172

**Current Mailing Address:**

1470 N.W. 107TH AVENUE  
SUITE F  
MIAMI, FL 33172 US

**FEI Number:** 65-1071109

**Certificate of Status Desired:** No

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

NORBERTO, HERNANDEZ  
1470 N.W. 107TH AVENUE  
SUITE F  
MIAMI, FL 33172 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            P  
Name            NORBERTO, HERNANDEZ  
Address        1470 NW 107 AVE STE F  
City-State-Zip: MIAMI FL 33172

Title            S  
Name            MARRERO, MARIETTA  
Address        1470 NW 107TH AVE,STE F  
City-State-Zip: MIAMI FL 33172

*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:** MARIETTA MARRERO

**SECRETARY**

**03/12/2025**

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

\_\_\_\_\_  
Date