

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000056984

**Entity Name:** FOREST LAKES DENTAL GROUP, P.A.

**Current Principal Place of Business:**

628 N BEAR LAKE RD  
APOPKA, FL 32703

**Current Mailing Address:**

C/O LOPEZ ACCOUNTING  
3408 W 84TH ST STE 106  
HIALEAH, FL 33018 US

**FEI Number:** 20-0968642

**Certificate of Status Desired:** No

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

MARTIN, CARLOS M  
628 N BEAR LAKE RD  
APOPKA, FL 32703 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 MARTIN, CARLOS M  
Address 1943 WINGFIELD DR  
City-State-Zip: LONGWOOD FL 32779

*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:** MARTIN, CARLOS M

**PRESIDENT**

**03/29/2017**

Electronic Signature of Signing Officer/Director Detail

Date