

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000134786

**Entity Name:** DENTAL EXCELLENCE CORPORATION

**Current Principal Place of Business:**

7965 STATE ROAD 50  
SUITE 1000-297  
GROVELAND, FL 34736

**Current Mailing Address:**

7965 STATE ROAD 50  
SUITE 1000-297  
GROVELAND, FL 34736 US

**FEI Number:** 20-1682007

**Certificate of Status Desired:** No

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

BUI, ANTHONY  
2420 KNIGHT LAKE ROAD  
GROVELAND, FL 34736 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 DR  
Name BUI, ANTHONY  
Address 2420 KNIGHT LAKE ROAD  
City-State-Zip: GROVELAND FL 34736

*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:** ANTHONY BUI

DR

04/30/2024

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

\_\_\_\_\_  
Date