

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000104700

Entity Name: TOWER DENTAL, INC.

Current Principal Place of Business:

27400 RIVERVIEW CENTER BLVD
BUILDING 8 SUITE 8
BONITA SPRINGS, FL 34134

Current Mailing Address:

27400 RIVERVIEW CENTER BLVD
BUILDING 8 SUITE 8
BONITA SPRINGS, FL 34134 US

FEI Number: 04-3821479

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROCHA, SONIA A
27400 RIVERVIEW CENTER BLVD
BUILDING 8 STE 8
BONITA SPRINGS, FL 34134 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 PTD
Name ROCHA, SONIA A
Address 27400 RIVERVIEW CENTER BLVD
 SUITE 8
City-State-Zip: BONITA SPRINGS FL 34134

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: SONIA A ROCHA

PRESIDENT

04/25/2016

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date