

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000104700

**Entity Name:** TOWER DENTAL, INC.

**Current Principal Place of Business:**

11121 HEALTH PARK BLVD  
200  
NAPLES, FL 34110

**Current Mailing Address:**

11121 HEALTH PARK BLVD  
200  
NAPLES, FL 34110 US

**FEI Number:** 04-3821479

**Certificate of Status Desired:** No

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

ROCHA , SONIA  
11121 HEALTH PARK BLVD  
200  
NAPLES, FL 34110 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:** SONIA ROCHA

06/20/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PTD  
Name           ROCHA, SONIA A  
Address        11121 HEALTH PARK BLVD  
                  200  
City-State-Zip: NAPLES FL 34110

*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 ROCHA

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06/20/2024

Electronic Signature of Signing Officer/Director Detail

Date