## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000157305

Entity Name: EXCLUSIVE DENTAL CARE GROUP, INC

**Current Principal Place of Business:** 

1724 N UNIVERSITY DR PEMBROKE PINES. FL 33024

**Current Mailing Address:** 

1724 N UNIVERSITY DR

PEMBROKE PINES. FL 33024 US

FEI Number: 20-8132022 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FIGUEROA, CELIA DDS 1724 N UNIVERSITY DR PEMBROKE PINES, FL 33024 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

FILED May 10, 2017

**Secretary of State** 

CC5882561206

Officer/Director Detail:

Title PSTD Title ES

NameFIGUEROA, CELIA DDSNameVALDES, VENESSAAddress1724 N UNIVERSITY DRAddress870 PLOVER AVECity-State-Zip:PEMBROKE PINES FL 33024City-State-Zip:MIAMI FL 33166

Title PRESIDENT

Name FIGUEROA, CELIA DR. Address 1724 N UNIVERSITY DR

City-State-Zip: PEMBROKE PINES FL 33024

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: CELIA FIGUEROA

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

05/10/2017

Date