

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000060674

Entity Name: NELCY M. TRIANA, DDS, P.A.

Current Principal Place of Business:

16456 SW 43RD ST
MIAMI, FL 33185

Current Mailing Address:

16456 SW 43RD ST
MIAMI, FL 33185 US

FEI Number: 27-3129141

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TRIANA, NELCY M
16456 SW 43RD ST
MIAMI, FL 33185 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 DPST
Name TRIANA, NELCY M
Address 16456 SW 43RD ST
City-State-Zip: MIAMI FL 33185

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: NELCY M TRIANA DDS PA

PRESIDENT

02/15/2016

Electronic Signature of Signing Officer/Director Detail

Date