2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 17, 2019
Secretary of State
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Entity Name: JACLYN HARDEN, DMD, P.A.

Current Principal Place of Business:

941 FIRETREE DR
NORTH PALM BEACH, FL 33408

Current Mailing Address:

941 FIRETREE RD
NORTH PALM BEACH, FL 33408

FEI Number: 32-0326424

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARDEN, JACLYN DMD
941 FIRETREE RD
NORTH PALM BEACH, FL 33408 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	HARDEN, JACLYN DMD
Address	941 FIRETREE RD
City-State-Zip:	NORTH PALM BEACH FL 33408

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: JACLYN HARDEN DMD PA OWNER/PRESIDENT 06/17/2019

Electronic Signature of Signing Officer/Director Detail — Date