

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000073823

**Entity Name:** MAIN STREET CHILDREN'S DENTISTRY AND ORTHODONTICS  
OF CAPE CORAL, P.A.

**FILED**  
**Apr 28, 2021**  
**Secretary of State**  
**9331893057CC**

**Current Principal Place of Business:**

1715 CAPE CORAL PARKWAY WEST  
13  
CAPE CORAL, FL 33914

**Current Mailing Address:**

6240 LAKE OSPREY DR.  
SARASOTA, FL 34240 US

**FEI Number: 45-3143541**

**Certificate of Status Desired: No**

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

ALLEN, RUSSELL  
6240 LAKE OSPREY DR.  
SARASOTA, FL 34240 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: RUSSELL ALLEN**

**04/28/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	DIRECTOR	Title	DIRECTOR
Name	GOBER, MELVYN S	Name	GALLO, DONALD
Address	13195 SW 134 STREET, 2ND FLOOR	Address	6240 LAKE OSPREY DR.
City-State-Zip:	MIAMI FL 33186	City-State-Zip:	SARASOTA FL 34240

*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: GOBER , MELVYN S**

**04/28/2021**

Electronic Signature of Signing Officer/Director Detail

Date