

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000091024

Entity Name: ENRIQUE MORALES, DDS, PA

Current Principal Place of Business:

3009 E 4 AVE
HIALEAH, FL 33013

Current Mailing Address:

3009 E 4 AVE
HIALEAH, FL 33013

FEI Number: 65-0724263

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORALES, ENRIQUE
3009 E 4 AVE
HIALEAH, FL 33013 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 PSTD
Name MORALES, ENRIQUE
Address 3009 E 4 AVE
City-State-Zip: HIALEAH FL 33013

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: ENRIQUE MORALES

DENTIST

01/28/2019

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date