## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000049456

Entity Name: MIAMI ILLUSIONS DENTAL LAB INC.

FILED
Apr 12, 2014
Secretary of State
CC8378421374

## **Current Principal Place of Business:**

13255 SOUTHWEST 137TH AVENUE SUITE 211 MIAMI, FL 33186

# **Current Mailing Address:**

13255 SOUTHWEST 137TH AVENUE SUITE 211 MIAMI, FL 33186

FEI Number: 46-2983316 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 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 DP Title DVST

Name VALDES, ADRIANA M Name VALDES, ANTONIO

Address 13255 SOUTHWEST 137TH AVENUE Address 13255 SOUTHWEST 137TH AVENUE

City-State-Zip: MIAMI FL 33186 City-State-Zip: MIAMI FL 33186

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.