

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000069657

Entity Name: FARAHAY SMILE CARE DDS , P.A

Current Principal Place of Business:

4005 SW 152ND AVE
UNIT 2
MIAMI, FL 33185

Current Mailing Address:

4005 SW 152ND AVE
UNIT 2
MIAMI, FL 33185 US

FEI Number: 46-3568569

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIAZ, FARAH A
4005 SW 152ND AVE
UNIT 2
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 P
Name DIAZ, FARAH A
Address 4005 SW 152ND AVE
UNIT 2
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: FARAH A DIAZ

P

03/09/2020

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date