

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000070912

Entity Name: DR. MARIA D VELIS DDS PA

Current Principal Place of Business:

8305 HAMMOCKS BLVD. APT 5203
MIAMI, FL 33193

Current Mailing Address:

8305 HAMMOCKS BLVD. APT 5203
MIAMI, FL 33193 US

FEI Number: 46-3529987

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VELIS, MARIA D
8305 HAMMOCKS BLVD. APT 5203
MIAMI, FL 33193 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 VELIS, MARIA D
Address 8305 HAMMOCKS BLVD. APT 5203
City-State-Zip: MIAMI FL 33193

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: MARIA D VELIS

OWNER

01/27/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date