

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000082278

Entity Name: MANN FAMILY ORTHODONTICS, P.A.

Current Principal Place of Business:

10887 N. MILITARY TRAIL
SUITE NO. 1
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

10887 N. MILITARY TRAIL
SUITE NO. 1
PALM BEACH GARDENS, FL 33410 US

FEI Number: 47-5232164

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MANN, JACOB DDS
10887 N. MILITARY TRAIL
SUITE NO. 1
PALM BEACH GARDENS, FL 33410 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 MANN, JACOB DDS
Address 10887 N. MILITARY TRAIL, SUITE NO.
1
City-State-Zip: PALM BEACH GARDENS FL 33410

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: JACOB MANN

PRESIDENT

02/11/2019

Electronic Signature of Signing Officer/Director Detail

Date