

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000058531

**Entity Name:** ILEANA ARIAS DDS, CORP.

**Current Principal Place of Business:**

3303 PORT ROYALE DR S,  
APT 205  
FORT-LAUDERDALE, FL 33308

**Current Mailing Address:**

3303 PORT ROYALE DR S,  
APT 205  
FORT-LAUDERDALE, FL 33308 US

**FEI Number:** 81-3266043

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ARIAS, ILEANA  
3303 PORT ROYALE DR S,  
APT 205  
FORT-LAUDERDALE, FL 33308 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  
Name ARIAS, ILEANA  
Address 3303 PORT ROYALE DR S,  
APT 205  
City-State-Zip: FORT-LAUDERDALE FL 33308

*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:** ILEANA ARIAS

**PRESIDENT**

**02/08/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date