

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000060964

Entity Name: DENTISTRY AT SERENITY COVE, INC.

Current Principal Place of Business:

15909 S.W 2 STREET
SUNRISE, FL 33326

Current Mailing Address:

15909 S.W 2 STREET
SUNRISE, FL 33326 US

FEI Number: 82-2208665

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORENA-OTERO, DEISY A
15909 S.W 2 STREET
SUNRISE, FL 33326 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 NORENA-OTERO, DEISY A
Address 140 LAKEVIEW DRIVE, APT 103
City-State-Zip: WESTON FL 33326

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: DEISY NORENA-OTERO

DR.

01/16/2020

Electronic Signature of Signing Officer/Director Detail

Date