ACOSTA, HECTOR M 5771 SW 40 STREET MIAMI, FL 33155 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	E HECTOR M ACOSTA			04/06/2021
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	VPD	Title	PD	
Name	ACOSTA, HECTOR M	Name	CLARO, RITA M	
Address	118 ZAMORA APT 301	Address	118 ZAMORA APT 301	
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134	
Title	VPD			
Name	CLARO, EMILIO E			

Current Mailing Address:

DOCUMENT# P17000087468

5771 SW 40 STREET MIAMI, FL 33155 US

5771 SW 40 STREET MIAMI, FL 33155

FEI Number: 82-3266306

Name and Address of Current Registered Agent:

5771 SW 40 STREET

City-State-Zip: MIAMI FL 33155

Entity Name: REDBIRD DENTAL CARE, INC.

Current Principal Place of Business:

ACOSTA 5771 SV MIAMI, I

Address

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: HECTOR M ACOSTA

Electronic Signature of Signing Officer/Director Detail

VP

FILED Apr 06, 2021 Secretary of State 1687394149CC

Certificate of Status Desired: No

2021 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT