

2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000013226

Entity Name: SMILE KEEPERS INC

Current Principal Place of Business:

617 ROBINSON OAKS LN
PLANT CITY, FL 33567

Current Mailing Address:

617 ROBINSON OAKS LN
PLANT CITY, FL 33567 US

FEI Number: 59-3518724

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, CONNIE
617 ROBINSON OAKS LN
PLANT CITY, FL 33567 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: CONNIE GARCIA

04/11/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GARCIA, CONNIE
Address 617 ROBINSON OAKS LN
City-State-Zip: PLANT CITY FL 33567

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: CONNIE GARCIA

PRESIDENT

04/11/2025

Electronic Signature of Signing Officer/Director Detail

Date