

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P18000018323

Entity Name: DORAL DENTAL STUDIO, INC

Current Principal Place of Business:

2100 NW 107 STREET
#106
MIAMI, FL 33172

Current Mailing Address:

2100 NW 107 STREET
#106
MIAMI, FL 33172 US

FEI Number: 82-4585554

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CUARTAS, ANDRES
2913 NW 97 CT
DORAL, FL 33172 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 CUARTAS, ANDRES
Address 2913 NW 97 CT
City-State-Zip: DORAL FL 33172

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: ANDRES CUARTAS

P

06/09/2020

Electronic Signature of Signing Officer/Director Detail

Date