

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000076226

Entity Name: SHEIKHAN SMILES DENTISTRY P.A.

Current Principal Place of Business:

915 N FRANKLIN STREET
TAMPA, FL 33602

Current Mailing Address:

N/A
N/A
TAMPA, FL 33602 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRAGER METIS CPAS LLC
777 BRICKELL AVENUE
SUITE 420
MIAMI, FL 33131 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 SHEIKHAN, N
Address N/A
City-State-Zip: TAMPA FL 33601

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: NUR SHEIKHAN

CEO

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date