

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000089638

Entity Name: MANUEL DELEON, DDS A PROFESSIONAL ASSOCIATION

Current Principal Place of Business:

5454 SW 84ST.
OCALA, FL 34476

Current Mailing Address:

5454 SW 84ST.
OCALA, FL 34476 US

FEI Number: 35-2166558

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DELEON, MANUEL DR.
5454 SW 84ST.
OCALA, FL 34476 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 CEO
Name DELEON, MANUEL DDS
Address 5454 SW 84ST.
City-State-Zip: Ocala FL 34476

Title SEC
Name ABRAMS, BOBBY
Address 7232 CANBY AVE, #7
City-State-Zip: RESEDA CA 91335

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: BOBBY ABRAMS

MR

02/06/2024

Electronic Signature of Signing Officer/Director Detail

Date