

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23000024207

Entity Name: ROSENTHAL FAMILY DENTISTRY, P.A.

Current Principal Place of Business:

9200 NW 44TH STREET
SUNRISE, FL 33351

Current Mailing Address:

9200 NW 44TH STREET
SUNRISE, FL 33351 US

FEI Number: 93-1896164

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BREIT, RICHARD H
8551 W SUNRISE BLVD
SUITE 300
PLANTATION, FL 33322 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 D,P
Name ROSENTHAL, BRIAN
Address 9200 NW 44TH ST
City-State-Zip: SUNRISE FL 33351

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: BRIAN ROSENTHAL

PRESIDENT

02/15/2024

Electronic Signature of Signing Officer/Director Detail

Date