

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000024254

**Entity Name:** LUIS RODRIGUEZ, D.D.S., P.A.

**Current Principal Place of Business:**

560 E 49TH ST  
HIALEAH, FL 33013

**Current Mailing Address:**

560 E 49TH ST  
HIALEAH, FL 33013

**FEI Number:** 65-0403080

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RODRIGUEZ, LUIS DDS  
560 E 49TH ST  
HIALEAH, FL 33013 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	DPST	Title	D
Name	RODRIGUEZ, LUIS DDS	Name	VEGA, ERNESTO
Address	560 EAST 49 ST.	Address	560 EAST 49 ST.
City-State-Zip:	HIALEAH FL 33013	City-State-Zip:	HIALEAH FL 33013

*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:** ERNESTO VEGA

**DIRECTOR**

**04/03/2018**

Electronic Signature of Signing Officer/Director Detail

Date