

**2025 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P94000093765

**Entity Name:** TWIN CITIES FAMILY AND IMPLANT DENTISTRY, P.A.

**Current Principal Place of Business:**

395 VALPARAISO PKWY  
VALPARAISO, FL 32580

**Current Mailing Address:**

395 VALPAIRAIISO PKWY  
VALPARAISO, FL 32580-0457 US

**FEI Number:** 59-3287513

**Certificate of Status Desired:** Yes

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

DEAGUIRRE, ELIZABETH  
395 VALPARAISO PKWY  
VALPARAISO, FL 32580 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:** ELIZABETH DEAGUIRRE

09/24/2025

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DR.  
Name DEAGUIRRE, ELIZABETH  
Address 395 VALPARAISO PKWY  
City-State-Zip: VALPARISO FL 32580

*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:** ELIZABETH DE AGUIRRE

OWNER

09/24/2025

Electronic Signature of Signing Officer/Director Detail

Date