

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000038184

Entity Name: NICOLAS AVALOS, D.M.D., P.A.

Current Principal Place of Business:

34 SW 37TH AVE
CORAL GABLES, FL 33134

Current Mailing Address:

34 SW 37TH AVE
CORAL GABLES, FL 33134

FEI Number: 65-0750760

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

P & L ACCOUNTING SYSTCORP
1005 SW 87TH AVE
MIAMI, FL 33174 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 DR.
Name AVALOS, NICOLAS
Address 34 SW 37TH AVE
City-State-Zip: CORAL GABLES FL 33134

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: NICOLAS AVALOS

DENTIST

01/03/2014

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date