

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000038449

**Entity Name:** ARMANDO BAEZ, D.D.S., P.A.

**Current Principal Place of Business:**

3850 SW 87TH AVE  
204  
MIAMI, FL 33165

**Current Mailing Address:**

3850 SW 87TH AVE  
204  
MIAMI, FL 33165

**FEI Number:** 65-0751760

**Certificate of Status Desired:** No

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

ACCOUNTING REVENUE SERVICE INC  
1031 EAST 8TH AVE  
HIALEAH, FL 33010 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 PSTD  
Name BAEZ, ARMANDO DDS  
Address 3850 SW 87TH AVE, STE 204  
City-State-Zip: MIAMI FL 33165

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:** ARMANDO BAEZ DDS

PSTD

03/13/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date