

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000068166

Entity Name: SOUTH FLORIDA PROSTHODONTICS, INC.

Current Principal Place of Business:

12600 PEMBROKE ROAD
SUITE 314
MIRAMAR, FL 33027-2544

Current Mailing Address:

4581 WESTON ROAD
#321
WESTON, FL 33331-3141 US

FEI Number: 65-0777791

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIEZ, FEDERICO DR
4581 WESTON ROAD
#321
WESTON, FL 33331-3141 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
Name DIEZ, FEDERICO DR
Address 4581 WESTON ROAD
#321
City-State-Zip: WESTON FL 33331-3141

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: FEDERICO DIEZ DDS

P

01/12/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date