

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000006633

Entity Name: SMILES BY DESIGN, INC.

Current Principal Place of Business:

4450 WESTON ROAD
DAVIE, FL 33331

Current Mailing Address:

4450 WESTON ROAD
DAVIE, FL 33331

FEI Number: 65-0825571

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, JOHN M
16460 N.E. 35TH AVE.
NORTH MIAMI BEACH, FL 33160 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 DP
Name GARCIA, JOHN M
Address 16460 N.E. 35TH AVE.
City-State-Zip: NORTH MIAMI BEACH FL 33160

Title DST
Name GARCIA, FRANCISCA
Address 16460 N.E. 35TH AVE.
City-State-Zip: NORTH MIAMI BEACH FL 33160

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: FRANCISCA GARCIA

VP

04/03/2019

Electronic Signature of Signing Officer/Director Detail

Date