

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000107091

**Entity Name:** ARTURO F. MOSQUERA, DMD., MS., P.A.

**Current Principal Place of Business:**

1245 S.W. 87TH AVENUE  
MIAMI, FL 33174

**Current Mailing Address:**

1245 S.W. 87TH AVENUE  
MIAMI, FL 33174

**FEI Number:** 65-0885217

**Certificate of Status Desired:** No

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

MOSQUERA, ARTURO F DMD, MS  
1245 S.W. 87TH AVENUE  
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:** ARTURO F. MOSQUERA

04/13/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PSDT  
Name MOSQUERA, ARTURO F DMD, MS  
Address 1245 S.W. 87TH AVENUE  
City-State-Zip: MIAMI FL 33174

*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:** ARTURO F. MOSQUERA

PRESIDENT

04/13/2023

Electronic Signature of Signing Officer/Director Detail

Date