## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000044369

Entity Name: AMERICA DENTAL CLINIC CORP.

**Current Principal Place of Business:** 

3631 SW 87 AVE MIAMI, FL 33165

**Current Mailing Address:** 

3631 SW 87 AVE MIAMI, FL 33165 US

FEI Number: 65-0919582 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOIRAC, MARIA 3631 SW 87TH AVE MIAMI, FL 33165 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

FILED Apr 26, 2015

**Secretary of State** 

CC8713330274

## Officer/Director Detail:

Title F

Name TOIRAC, MARIA
Address 3631 SW 87TH AVE.
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: MARIA TOIRAC PRES