

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000064360

Entity Name: SHAPIRO FAMILY DENTISTRY, P.A.

Current Principal Place of Business:

2247 PALM BEACH LAKES BLVD.
SUITE 104
WEST PALM BEACH, FL 33409

Current Mailing Address:

2247 PALM BEACH LAKES BLVD.
SUITE 104
WEST PALM BEACH, FL 33409

FEI Number: 65-0949510

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHAPIRO, SETH
2247 PALM BEACH LAKES BLVD. STE 104
STE 104
WEST PALM BEACH, FL 33409 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 P
Name SHAPIRO, DARI
Address 2247 PALM BEACH LAKES BLVD
STE 104
City-State-Zip: WEST PALM BEACH FL 33409

Title S
Name SHAPIRO, SETH
Address 2247 PALM BEACH LAKES BLVD
STE 104
City-State-Zip: WEST PALM BEACH FL 33409

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: SETH SHAPIRO

S

01/23/2023

Electronic Signature of Signing Officer/Director Detail

Date