

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000106300

**Entity Name:** EMILIO MARTINEZ, D.D.S., P.A.

**Current Principal Place of Business:**

5120 TURNPIKE FEEDER ROAD  
FORT PIERCE, FL 34951-2023

**Current Mailing Address:**

5120 TURNPIKE FEEDER ROAD  
FORT PIERCE, FL 34951-2023

**FEI Number:** 65-0972776

**Certificate of Status Desired:** No

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

MARTINEZ, EMILIO  
5120 TURNPIKE FEEDER RD  
FORT PIERCE, FL 34951 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 DR  
Name MARTINEZ, EMILIO  
Address 5120 TURNPIKE FEEDER RD  
City-State-Zip: FORT PIERCE FL 34951

*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:** EMILIO MARTINEZ

PRES

02/10/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date