

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V57081

**Entity Name:** PABLO AND MAYRA DEBS, D.D.S. P.A.

**Current Principal Place of Business:**

220 WEST 49TH ST  
HIALEAH, FL 33012

**Current Mailing Address:**

220 WEST 49TH ST  
HIALEAH, FL 33012 US

**FEI Number:** 65-0351050

**Certificate of Status Desired:** No

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

PABLO DEBS  
220 W 49TH STREET  
HIALEAH, FL 33012 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	DPT	Title	DVS
Name	DEBS, PABLO	Name	DEBS, MAYRA
Address	220 W 49TH STREET	Address	220 W 49TH STREET
City-State-Zip:	HIALEAH FL 33012	City-State-Zip:	HIALEAH FL 33012

*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:** PABLO DEBS

DPT

02/09/2015

Electronic Signature of Signing Officer/Director Detail

Date