## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000023387

Entity Name: EDWARD GOMEZ DDS, PA

**Current Principal Place of Business:** 

7618 NW 186 STREET MIAMI, FL 33015

**Current Mailing Address:** 

7618 NW 186 STREET MIAMI, FL 33015 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOMEZ, EDWARD 8305 NW 161ST TERRACE MIAMI LAKES, FL 33016-6624 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 13, 2013

**Secretary of State** 

CC5661762439

Authorized Person(s) Detail:

Title MGRM

GRM Title MGRM

Name GOMEZ, EDWARD Name GOMEZ, GLADYS

Address 8305 NW 161ST TERRACE Address 8305 NW 161 TERRACE
City-State-Zip: MIAMI LAKES FL 33016-6624 City-State-Zip: MIAMI LAKES FL 33016

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GOMEZ, EDWARD

Electronic Signature of Signing Authorized Person(s) Detail

MGRM

04/13/2013