

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000144360

Entity Name: ABDONEY ORTHODONTICS, PLLC

Current Principal Place of Business:

4014 WEST ESTRELLA STREET
TAMPA, FL 33629

Current Mailing Address:

4014 WEST ESTRELLA STREET
TAMPA, FL 33629

FEI Number: 59-1197844

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABDONEY, MICHAEL L
4014 WEST ESTRELLA STREET
TAMPA, FL 33629 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

Authorized Person(s) Detail :

Title MGR
Name ABDONEY, MICHAEL L
Address 4014 W. ESTRELLA ST.
City-State-Zip: TAMPA FL 33629

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: DR. MICHAEL L. ABDONEY

MANAGER

01/29/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date