

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000159914

**Entity Name:** FELICITA MARQUEZ IGLESIAS, DDS PLLC

**Current Principal Place of Business:**

4890 W 3RD AVE  
HIALEAH, FL 33012

**Current Mailing Address:**

4890 W 3RD AVE  
MIAMI, FL 33012 US

**FEI Number:** 46-4110142

**Certificate of Status Desired:** No

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

BANOS, JORGE L  
8220 CORAL WAY  
MIAMI, FL 33155 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 MGRM  
Name MARQUEZ IGLESIAS, FELICITA  
Address 4890 W 3RD AVE  
City-State-Zip: MIAMI 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARQUEZ IGLESIAS , FELICITA

**PRESIDENT**

**03/06/2015**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date