## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000082494

Entity Name: C & G DENTAL, LLC

**Current Principal Place of Business:** 

3530 MYSTIC POINTE DR **APT 712** 

AVENTURA, FL 33180

## **Current Mailing Address:**

3530 MYSTIC POINTE DR **APT 712** AVENTURA, FL 33180 US

FEI Number: 46-5751492 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CASTILLO, SANDRA M 3530 MYSTIC POINTE DR **APT 712** AVENTURA, FL 33180 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: SANDRA M CASTILLO 04/15/2018

> Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MGR

CASTILLO, SANDRA M Name 3530 MYSTIC POINTE DR Address

**APT 712** 

SIGNATURE: SANDRA M CASTILLO

City-State-Zip: AVENTURA FL 33180

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail

**FILED** Apr 15, 2018

**Secretary of State** 

CC2234789362

Date

04/15/2018