

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000129852

Entity Name: VEVERA FAMILY DENTAL LLC

Current Principal Place of Business:

2 INWOOD WAY
INDIAN HARBOUR BEACH, FL 32937

Current Mailing Address:

2 INWOOD WAY
INDIAN HARBOUR BEACH, FL 32937

FEI Number: 47-1619505

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTIN, MIRTHA V CPA
420 S COUNTRY CLUB ROAD
LAKE MARY, FL 32746 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 VEVERA, KEITH
Address 2 INWOOD WAY
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

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: KEITH VEVERA

MGR

02/25/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date