

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000129852

Entity Name: VEVERA FAMILY DENTAL LLC

Current Principal Place of Business:

133 ISLAND VIEW DR
INDIAN HARBOUR BEACH, FL 32937

Current Mailing Address:

133 ISLAND VIEW DR
INDIAN HARBOUR BEACH, FL 32937 US

FEI Number: 47-1619505

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTIN, MIRTHA V CPA
1239 OCEAN SHORE BLVD #7B
ORMOND BEACH, FL 32176 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	Title	MANAGER
Name	VEVERA, KEITH	Name	VEVERA, DAWN
Address	133 ISLAND VIEW DR	Address	133 ISLAND VIEW DR
City-State-Zip:	INDIAN HARBOUR BEACH FL 32937	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: DAWN VEVERA

OFFICE MANAGER

02/19/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date