

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000113084

Entity Name: DORAL MODERN DENTISTRY

Current Principal Place of Business:

1601 N FLAMINGO RD.
3
PEMBROKE PINES, FL 33028

Current Mailing Address:

1601 N FLAMINGO RD
3
PEMBROKE PINES, FL 33028 US

FEI Number: 82-5506587

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TORRESE AND ASSOCIATES
444 BRICKELL AVE. SUITE P-28
MIAMI, FL 33131 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 RIOS, MILAGRITOS
Address 9915 COSTA DEL SOL BLVD
City-State-Zip: DORAL FL 33178

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: MILAGRITOS RIOS

MGR

02/08/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date