

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000233314

**Entity Name:** PRIME DENTAL GROUP, LLC

**Current Principal Place of Business:**

8333 NW 12TH ST  
DORAL, FL 33126

**Current Mailing Address:**

8333 NW 12TH ST  
DORAL, FL 33126 US

**FEI Number:** 82-3793360

**Certificate of Status Desired:** No

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

CASTRO, OSCAR L JR  
8333 NW 12TH ST  
DORAL, FL 33126 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:** OSCAR L CASTRO JR

02/12/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AMBR	Title	AMBR
Name	CASTRO, OSCAR L JR	Name	HENNESSY, MICHAEL
Address	8333 NW 12TH ST	Address	8333 NW 12TH ST
City-State-Zip:	DORAL FL 33126	City-State-Zip:	DORAL FL 33126

*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:** OSCAR CASTRO

OWNER

02/12/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date