

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000397715

**Entity Name:** ARENA DENTAL STUDIO LLC

**Current Principal Place of Business:**

333 NW 70TH AVE  
#104  
PLANTATION, FL 33317

**Current Mailing Address:**

333 NW 70TH AVE  
#104  
PLANTATION, FL 33317 US

**FEI Number:** 92-0337583

**Certificate of Status Desired:** No

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

POZAICER URIBE, HUGO DR  
333 NW 70TH AVE  
#104  
PLANTATION, FL 33317 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 AMBR  
Name POZAICER URIBE, HUGO DANIEL DR  
Address 333 NW 70TH AVE  
#104  
City-State-Zip: PLANTATION FL 33317

Title AMBR  
Name MOLINA, GABRIELA DR  
Address 333 NW 70TH AVE  
#104  
City-State-Zip: PLANTATION FL 33317

*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:** POZAICER URIBE HUGO DANIEL

AMBR

02/07/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date