

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000480290

**Entity Name:** MOUNT DORA SMILES PLLC

**Current Principal Place of Business:**

19001 US HWY 441  
MOUNT DORA, FL 32757

**Current Mailing Address:**

5312 NAGAMI DRIVE  
WINDERMERE, FL 34786 US

**FEI Number:** 88-4309370

**Certificate of Status Desired:** No

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

TC NGUYENCO & COMPANY  
7860 BEAR CLAW RUN  
ORLANDO, FL 32825 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 PHU VAN DMD PLLC  
Address 5312 NAGAMI DR  
City-State-Zip: WINDERMERE FL 34786

*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:** PHU CONG VAN

**PRESIDENT**

**01/28/2025**

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

\_\_\_\_\_  
Date