

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000169623

Entity Name: SABRIL DENTAL SERVICES LLC

Current Principal Place of Business:

12401 NE 16 AVE
APT # 325
NORTH MIAMI, FL 33161

Current Mailing Address:

12401 NE 16 AVE
APT # 325
NORTH MIAMI, FL 33161

FEI Number: 99-2307503

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SABRIL, JELIBETH C
12401 NE 16 AVE
APT # 325
NORTH MIAMI, FL 33161 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 GALUE, JOSE A
Address 12401 NE 16 AVE APT # 325
City-State-Zip: NORTH MIAMI FL 33161

Title AMBR
Name SABRIL, JELIBETH C
Address 12401 NE 16TH AVE APT #325
City-State-Zip: NORTH MIAMI FL 33161

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: SABRIL , JELIBETH

OWNER

03/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date