

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000007391

Entity Name: SOPHIA PARPIA, D.D.S., P.L.L.C.

Current Principal Place of Business:

777 DOUGLAS AVENUE
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

777 DOUGLAS AVENUE
ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3608958

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARPIA, AMMAN
221 CAPRI COVE PLACE
SANFORD, FL 32771 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 MGRM
Name PARPIA, ASHIFA
Address 221 CAPRI COVE PLACE
City-State-Zip: SANFORD FL 32771

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: ASHIFA PARPIA

MANAGER

03/25/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date