

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000041685

**Entity Name:** IDEAL BRACES, P.A.

**Current Principal Place of Business:**

3225 MCLEOD DR, SUITE 100  
LAS VEGAS, NV 89121

**Current Mailing Address:**

3225 MCLEOD DR, SUITE 100  
LAS VEGAS, NV 89121 US

**FEI Number:** 46-5673093

**Certificate of Status Desired:** No

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

ANDERSON REGISTERED AGENTS, INC.  
625 E.TWIGGS STREET  
SUITE 110  
TAMPA, FL 33602 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:** A. T. MATHIS

04/11/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            ESCOTT, CHRISTOPHER DR.  
Address        3225 MCLEOD DR, SUITE 100  
City-State-Zip: LAS VEGAS NV 89121

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** ESCOTT , CHRISTOPHER , DR

**AUTHORIZED AGENT**

04/11/2023

Electronic Signature of Signing Officer/Director Detail

Date