

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000070192

Entity Name: REZA SAFFARI, M.D., P.A.

**FILED**  
**Apr 14, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5210 LINTON BLVD  
DELRAY BEACH, FL 33484

**New Principal Place of Business:**

166 TUSCAN CIRCLE  
JUPITER, FL 33458

**Current Mailing Address:**

166 TUSCAN CIRCLE  
JUPITER, FL 33458

**New Mailing Address:**

FEI Number: 26-3045415

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SAFFARI, REZA  
166 TUSCAN CIRCLE  
JUPITER, FL 33458 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SAFFARI, REZA  
Address: 166 TUSCAN CIRCLE  
City-St-Zip: JUPITER, FL 33458

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: REZA SAFFARI

PRES

04/14/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date