

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H78560

**Entity Name:** WEINSTEIN MEINBACH UROLOGY, P.A.

**Current Principal Place of Business:**

4889 SOUTH CONGRESS AVE  
LAKE WORTH, FL 33461

**Current Mailing Address:**

4889 SOUTH CONGRESS AVE  
LAKE WORTH, FL 33461 US

**FEI Number:** 59-2581743

**Certificate of Status Desired:** Yes

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

WEINSTEIN, DAVID  
4889 S. CONGRESS AVENUE  
LAKE WORTH, FL 33461 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

**Officer/Director Detail :**

Title P  
Name WEINSTEIN, DAVID M.D.  
Address 4744 SOUTH OCEAN BLVD.  
APT. 7  
City-State-Zip: HIGHLAND BEACH FL 33487

Title VST  
Name MEINBACH, DAVID  
Address 935 FERN DR.  
City-State-Zip: DELRAY BEACH FL 33483

*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:** DAVID WEINSTEIN

**REGISTERED AGENT**

**01/12/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date