

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K34174

**Entity Name:** PLAZA PODIATRY ASSOCIATES, P.A.

**Current Principal Place of Business:**

5432 W. SAMPLE ROAD  
MARGATE, FL 33073

**Current Mailing Address:**

5432 W. SAMPLE ROAD  
MARGATE, FL 33073

**FEI Number: 65-0077347**

**Certificate of Status Desired: No**

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

BLECKER, STEVEN  
5300 WEST HILLSBORO BOULEVARD  
SUITE 104  
COCONUT CREEK, FL 33073 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 DR  
Name TOBMAN, KAREN R.  
Address 5432 WEST SAMPLE RD.  
City-State-Zip: MARGATE FL 33073

*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: KAREN R TOBMAN**

**PRESIDENT**

**04/01/2013**

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

\_\_\_\_\_  
Date