

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000081977

Entity Name: ARNOLD H. KOSSOFF, P.A.

**FILED**  
**Jan 13, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

10378 STONEBRIDGE BLVD  
BOCA RATON, FL 33498

**New Principal Place of Business:**

**Current Mailing Address:**

C/O KWEIT, MANTELL & DELUCIA LLP  
534 BROAD HOLLW ROAD SUITE 300  
MELVILLE, NY 11747

**New Mailing Address:**

FEI Number: 11-2452153

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KOSSOFF, ARNOLD  
10378 STONEBRIDGE BLVD  
BOCA RATON, FL 33498 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: PRES  
Name: KOSSOFF, ARNOLD  
Address: 10378 STONEBRIDGE BLVD  
City-St-Zip: BOCA RATON, FL 33498

Title: S  
Name: KOSSOFF, ESTHER  
Address: 10378 STONEBRIDGE BLVD  
City-St-Zip: BOCA RATON, FL 33498

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: ARNOLD KOSSOFF

PRES

01/13/2011

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

\_\_\_\_\_  
Date