

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000021694

Entity Name: DELIA WEISS, M.D. P.A.

**FILED**  
**Sep 16, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1 S.E. 4TH AVE.  
DELRAY BEACH, FL 33483 US

**New Principal Place of Business:**

1 S.E. 4TH AVE.  
SUITE 206  
DELRAY BEACH, FL 33483 US

**Current Mailing Address:**

P.O. BOX 27  
BOYNTON BEACH, FL 33425 US

**New Mailing Address:**

FEI Number: 01-0952953

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WEISS, DELIA  
45 SE 7TH AVENUE  
APT. 1  
DELRAY BEACH, FL 33483 US

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

WEISS, DELIA  
116 S.E. 10TH AVENUE  
BOYNTON BEACH, FL 33483 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

09/16/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WEISS, DELIA  
Address: P.O. BOX 27  
City-St-Zip: BOYNTON BEACH, FL 33425 US

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: DELIA WEISS

P

09/16/2011

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

\_\_\_\_\_  
Date