FILE ANNUAL REPORT FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT 2000

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 02, 2000 8:00 am
Secretary of State
06-02-2000 90004 027 ***150.00

[redacted]

DOCUMENT # L34887

1. Corporation Name

PSYCHOLOGICAL & EDUCATIONAL CENTER FOR CHILDREN AND ADOLESCENTS, INC.

Principal Place of Business
7600 SW 57TH AVE
SUITE #304
SOUTH MIAMI FL 33143
US

Mailing Address
7600 SW 57TH AVE
SSUITE #304
SOUTH MIAMI FL 33143
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt #, etc.
City & State
Zip | Country 25

2a. Mailing Address 26
Suite, Apt #, etc. 27
City & State 28
Zip 29 | Country 30

3. Date Incorporated or Qualified: 12/08/1989

4. FEI Number: 65-0160969 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation owes the current year intangible Personal Property Tax ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

AZARET, MARISA
7800 SW 87TH AVE., SUITE B-250
MIAMI FL 33173

10. Name and Address of New Registered Agent

81 Name: AZARET, MARISA
82 Street Address (P.O. Box Number is Not Acceptable): 7600 SW 57 AVE.
83 SUITE # 221 + 223
84 City: SO. MIAMI FL 85 Zip Code: 33143

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	AZARET, MARISA
STREET ADDRESS	6507 SW 116TH PLACE #A
CITY-ST-ZIP	MIAMI FL
TITLE	D
NAME	UMBEL, VIVIAN
STREET ADDRESS	480 CAMPANA AVE.
CITY-ST-ZIP	CORAL GABLES FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Vivian Umbel VIVIAN UMBEL Director 4/26/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)