

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000062811

**FILED**  
**Apr 28, 2005**  
**Secretary of State**

**Entity Name:** ALINA GASTESI-DE ARMAS, MS, MA, LMHC, P.A.

**Current Principal Place of Business:**

2645 EXECUTIVE PARK DR.  
WESTON, FL 33331

**New Principal Place of Business:**

**Current Mailing Address:**

2645 EXECUTIVE PARK DR.  
WESTON, FL 33331

**New Mailing Address:**

FEI Number: 65-1115085

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DE ARMAS, OSCAR  
3822 PINE LAKE DRIVE  
WESTON, FL 33332 US

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

DE ARMAS, OSCAR  
14906 SW 37 ST  
DAVIE, FL 33331 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: OSCAR DE ARMAS

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GASTESI - DE ARMAS, ALINAS  
Address: 2645 EXECUTIVE PARK DR  
City-St-Zip: WESTON, FL 33331

Title: V ( ) Delete  
Name: DE ARMAS, OSCAR  
Address: 2645 EXECUTIVE PARK DRIVE  
City-St-Zip: WESTON, FL 33331

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALINA GASTESI-DE ARMAS

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date