2012 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

DOCUMENT# P03000043489

Entity Name: GALIT SHALOM, PSY. D., P.A.

FILED Jan 10, 2012 Secretary of State

Date

New Principal Place of Business: Current Principal Place of Business: 370 W. CAMINO GARDENS BLVD, SUITE 343 BOCA RATON, FL 33432 **Current Mailing Address: New Mailing Address:** P.O. BOX 4253 DEERFIELD BEACH, FL 33442 FEI Number: 14-1881332 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SHALOM, GALIT PSY. D SILVER IŚLES 16493 SW 27 STREET MIRAMAR, FL 33027 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.

OFFICERS AND DIRECTORS:

Title:

SIGNATURE:

 Name:
 SHALOM, GALIT PSY. D.

 Address:
 16493 SW 27 STREET

 City-St-Zip:
 MIRAMAR, FL 33027

Title: D

Name: SHALOM, GALIT PSY.D. Address: 16493 SW 27 STREET City-St-Zip: MIRAMAR, FL 33027

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: GALIT SHALOM, PSY.D. D 01/10/2012