

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90089 023 ***150.00

DOCUMENT # P03000071690
 1. Entity Name
 SQ MONTALVO, LMHC, PA.



Principal Place of Business: 934 N. MAGNOLIA AVENUE, STE. 119, ORLANDO, FL 32803
 Mailing Address: 8537 BUCKLEY COURT, ORLANDO, FL 32817

DO NOT WRITE IN THIS SPACE

90100100



04192007 No Chg-P CR2E034 (11/05)

4. FEI Number: 86-1069214 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 MONTALVO, SUSANA Q
 8537 BUCKLEY COURT
 ORLANDO, FL 32817

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00
 9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MONTALVO, SUSANA Q 8537 BUCKLEY COURT ORLANDO, FL 32817
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Susana Q Montalvo 04/26/07 407 310-1273
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #