# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000046061

**FILED**
**Jan 16, 2002  8:00 AM**
**Secretary of State**

**Entity Name:**  AVENTURA COUNSELING CENTER, P.A.

| **Current Principal Place of Business:** | **New Principal Place of Business:** |
|---|---|
| 2999 NE 191 ST., SUITE 902<br>AVENTURA, FL  33180 | |

| **Current Mailing Address:** | **New Mailing Address:** |
|---|---|
| 2999 NE 191 ST., SUITE 902<br>AVENTURA, FL  33180 | |

FEI Number: 65-1104947      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:** |
|---|---|
| CADENAS, MARIA ISABEL  CPA<br>5890 SW 82 STREET<br>MIAMI, FL  33143     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                              Date

**This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).**
**Election Campaign Financing Trust Fund Contribution ( ).**

| **OFFICERS AND DIRECTORS:** | **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:** |
|---|---|
| Title:      D      ( ) Delete<br>Name:   HAUSMANN, HANNY<br>Address:  10720 BEXLEY BLVD.<br>City-St-Zip:  BOCA RATON, FL  33428 | Title:      ( ) Change  ( ) Addition<br>Name:<br>Address:<br>City-St-Zip: |
| Title:      D      ( ) Delete<br>Name:   HAUSMANN, DAVID W<br>Address:  10720 BEXLEY BLVD.<br>City-St-Zip:  BOCA RATON, FL  33428 | Title:      ( ) Change  ( ) Addition<br>Name:<br>Address:<br>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:  DAVID HAUSMANN                                    D                          01/16/2002

 Electronic Signature of Signing Officer or Director                                      Date