

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L34887

Entity Name: PSYCHOLOGICAL & EDUCATIONAL CENTER FOR CHILDREN
AND ADOLESCENTS, INC.

FILED
Jan 19, 2014
Secretary of State
CC1020730163

Current Principal Place of Business:

2519 GALIANO ST
SUITE 712
CORAL GABLES, FL 33134

Current Mailing Address:

2519 GALIANO ST
SUITE 712
CORAL GABLES, FL 33134 US

FEI Number: 65-0160969

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AZARET, MARISA
2519 GALIANO ST.
SUITE 712
CORAL GABLES, FL 33134 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

Officer/Director Detail :

Title D
Name AZARET, MARISA
Address 1865 BRICKELL AVE A-1708
City-State-Zip: MIAMI FL 33129

Title D
Name UMBEL, VIVIAN
Address 1581 BRICKELL AVENUE APT.1204
City-State-Zip: MIAMI FL 33129

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: MARISA AZARET

DIRECTOR

01/19/2014

Electronic Signature of Signing Officer/Director Detail

Date