

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000088578

**Entity Name:** MHM PSYKHE, INC.

**Current Principal Place of Business:**

1149 INDEPENDENCE TRAIL  
K  
HOMESTEAD, FL 33034

**Current Mailing Address:**

1149 INDEPENDENCE TRAIL  
K  
HOMESTEAD, FL 33034 US

**FEI Number:** 82-3442431

**Certificate of Status Desired:** No

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

ESTRADA, DENNIS  
1149 INDEPENDENCE TRAIL  
K  
HOMESTEAD, FL 33034 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 P  
Name ESTRADA, DENNIS  
Address 1149 INDEPENDENCE TRAIL, APT K  
City-State-Zip: HOMESTEAD FL 33034

*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:** DENNIS ESTRADA

**PRESIDENT**

**04/15/2019**

\_\_\_\_\_

Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_

Date