

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000058301

**Entity Name:** ABA BEHAVIOR THERAPY INC

**Current Principal Place of Business:**

1112 E MOWRY DR  
104  
HOMESTEAD, FL 33030

**Current Mailing Address:**

1112 E MOWRY DR  
104  
HOMESTEAD, FL 33030 US

**FEI Number:** 87-1339740

**Certificate of Status Desired:** No

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

HERNANDEZ CASTELAR, LEIDY  
1112 E MOWRY DR  
104  
HOMESTEAD, FL 33030 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 HERNANDEZ CASTELAR, LEIDY  
Address 1112 E MOWRY DR APT 104  
City-State-Zip: HOMESTEAD FL 33030

*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:** HERNANDEZ CASTELAR , LEIDY

P

03/20/2022

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date