2014 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 08, 2014
Secretary of State
CC4057417949

DOCUMENT# P97000084155

Entity Name: MULTILINGUAL PSYCHOTHERAPY CENTERS, INC.

Current Principal Place of Business:

1639 FORUM PLACE
SUITE #7
WEST PALM BEACH, FL 33401

Current Mailing Address:

1639 FORUM PLACE
SUITE #7
WEST PALM BEACH, FL 33401 US

FEI Number: 65-0789015

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MEROLA, JAMES R ESQ.
11380 PROSPERITY FARMS ROAD
SUITE #204
PALM BEACH GARDENS, FL 33410 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: JAMES R. MEROLA 08/08/2014

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P/D	Title	S/D
Name	MALOOF, MARIA I	Name	PAJARES, ALICIA B
Address	236 BLOOMFIELD DR	Address	236 BLOOMFIELD DRIVE
City-State-Zip:	WEST PALM BEACH FL 33405	City-State-Zip:	WEST PALM BEACH FL 33405
Title	T/D	Title	D
Name	CABRAL, CAESER R JR.	Name	CROSBY, FRANCIS X.
Address	1639 FORUM PLACE SUITE #7	Address	1639 FORUM PLACE SUITE #7
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401
Title	D		
Name	DORANTE, JOSE M		
Address	1639 FORUM PLACE SUITE #7		
City-State-Zip:	WEST PALM BEACH FL 33401		

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: ALICIA B. PAJARES SECRETARY 08/08/2014

Electronic Signature of Signing Officer/Director Detail — Date