

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000005100

FILED
Jan 22, 2016
Secretary of State
CC3480404321

Entity Name: MATRIX INTEGRATED PSYCHOLOGICAL SERVICES AND EMPLOYEE ASSISTANCE PROGRAMS, INC.

Current Principal Place of Business:

2 EASTON OVAL, SUITE 450
COLUMBUS, OH 43219

Current Mailing Address:

2 EASTON OVAL, SUITE 450
COLUMBUS, OH 43219

FEI Number: 31-1446811

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MALKOFF, HEATHER
20191 E COUNTRY CLUB DR, SUITE B
AVENTURA, FL 33180 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 MALKOFF, KURT
Address 2 EASTON OVAL, SUITE 450
City-State-Zip: COLUMBUS OH 43219

Title VP
Name PORTMAN, TOBY
Address 2 EASTON OVAL, SUITE 450
City-State-Zip: COLUMBUS OH 43219

Title S
Name MALKOFF, LESLIE
Address 2 EASTON OVAL, SUITE 450
City-State-Zip: COLUMBUS OH 43219

Title T
Name MALKOFF, HEATHER
Address 20191 E COUNTRY CLUB DR, SUITE B
City-State-Zip: AVENTURA FL 33180

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: TOBY PORTMAN

EXECUTIVE VICE
PRESIDENT

01/22/2016

Electronic Signature of Signing Officer/Director Detail

Date