

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000000051

**Entity Name:** ABLE TO BEHAVIORAL HEALTH SERVICES, PC

**Current Principal Place of Business:**

320 W 37TH ST 7TH FLOOR  
NEW YORK, NY 10018

**Current Mailing Address:**

320 W 37TH ST 7TH FLOOR  
NEW YORK, NY 10018 US

**FEI Number:** 47-5519672

**Certificate of Status Desired:** Yes

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 DPT  
Name PETERS, AIMEE  
Address 43 WAGON WHEEL  
City-State-Zip: REDDING CT 06896

Title S  
Name KAPLOW, SHARON  
Address 18 BARIAR BRAE ROAD  
City-State-Zip: STAMFORD CT 06903

*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:** AIMEE PETERS

**PRESIDENT**

**02/13/2017**

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

\_\_\_\_\_  
Date