PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 361169 Corporation Name

Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90031 019 ***150.00

MENTAL	STOTEMS OF HIALEAN IN	1 0							
Principal Place	e of Business	Mailing Address				J 188700 11510 BITAN 11601 15010 DITEN 2011 DIDIL A	1411 bibii e	1811 B181 (881	
897 EAST 25TH STREET 897 EAST 25TH STREET									
HIALEAH FL 33013 HIALEAH FL 33013						DO NOT WORK IN THE OR			
					-	DO NOT WRITE IN THIS SPA	<u> </u>	1	
					3.	Date Incorporated or Qualifed			
						03/17/1970 FEI Number	TAD	plied For	
2. Principal Place of Business 2a. Mailing Address						59-1291470	Not Applicable		
26						\$8.75 4			
					5.	5. Certificate of Status Desired Fee Required			
22 27 City & State City & State					· 6.	6, Election Campaign Financing - \$5.00 May Be			
23 28						Trust Fund Contribution	Added to		
Zip Country Zip			Country		8.	8. This corporation owes the current year Intangible			
24	25	29 31	0			1 01001idi 1 toponi) izmi —		□No	
	9. Name and Address of Curre	nt Registered Agent			10	. Name and Address of New Registered Age	nt		
			81	Name					
RUSHING, DERK				Street /	Street Address (P.O. Box Number is Not Acceptable)				
1351 NE 102 ST			82						
MIAMI, FL			83						
MIAN	MI SHORES FL 33138		84	City		8	5 Zip C	Code	
				· ·		on submits this statement for the purpose of cha	1		
	Signature, typed or printed name of registered ag	•1	egisterød Agen	nt signature n	·	reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND D			
12.		ND DIRECTORS	13.	3			Change	Addition	
TITLE	brichino pepr	- Octob	1.2 NAME	ļ					
NAME	RUSHING, DERK 1351 NE 102 ST		1.3 STREET	ADDDESS					
STREET ADDRESS	MIAMI SHORES FL		1.4 CITY-\$	ŀ				ļ	
CITY-\$T-ZIP	T	DELETE	2.1 TITLE	5-ZIF			Change	Addition	
NAME	RUSHING, PATRICIA		2.2 NAME						
STREET ADDRESS	10062 SW 56 ST		2.3 STREET	ADDRESS					
CITY-ST-ZIP	COOPER CITY FL 33314		2. 4 CITY-S						
TITLE			3.1 TITLE	-			Change	Addition	
NAME	ه ال منفرون ← مستور ، مساور ، مساور ا		3.2 NAME	F	. ~	يدائ بسد بجيده			
STREET ADDRESS	1351 NE 102 ST		3.3 STREET	TADDRESS]	
CITY-ST-ZIP	MIAMI SHORES FL		3.4, CfTY-S	T-ZiP					
TITLE		☐ DELETE 4.11] Change	Addition	
NAME			4.2 NAME		1				
STREET ADDRESS			4.3 STREET	T ADDRESS					
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	L		10		
TITLE		DELETE 5.11] Change	Addition	
NAME		•	5.2 NAME						
STREET ADDRESS			5.3 STREET		ļ				
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			1064	[""] A	
TITLE		☐ DELETE	6.1 TITLE	:	1	L] Change	Addition	
NAME			6.2 NAME		i	•			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP