

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000003614

**FILED**  
**Mar 14, 2012**  
**Secretary of State**

**Entity Name:** PSYCHOLOGICAL SOFTWARE SOLUTIONS, INC.

**Current Principal Place of Business:**

4119 MONTROSE BLVD SUITE 500  
HOUSTON, TX 77006 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 667566  
HOUSTON, TX 772667566 US

**New Mailing Address:**

**FEI Number:** 76-0656686

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** PISECCO, PHD, STEWART  
**Address:** 2015 SWIFT BLVD  
**City-St-Zip:** HOUSTON, TX 77030 US

**Title:** T  
**Name:** BRUCH, JR., FORREST B  
**Address:** 4238 DARTMOUTH  
**City-St-Zip:** HOUSTON, TX 77005 US

**Title:** S  
**Name:** MCPHERSON, ROBERT H  
**Address:** 4516 PALMETTO  
**City-St-Zip:** BELLAIRE, TX 77401 US

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:** STEWART PISECCO

CEO

03/14/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date