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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

CORAL SPRINGS PRIVATE COUNSELING SERVICES, INC.

FILED Jan 22 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address				ı indiriye dini bişka jelda dişmi dir	10 0414 WIQ11 BIU11	U U U U Q 17 U	
2393 N.W. 59TH ST P.O. BOX 840038 BOCA RATON FL 33496 PEMBROKE-PINES FL 33084-2038 US US						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
						01/26/1987	•		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Ā	oplied For
21 223	5 flates Kd				counseling	59-2754621			ot Applicable
Suite, Apt.	#, etc. 24A-65	Suite, Apt. #, etc.	P.O. Bo Raton,	x 81 FL 8	1 2602 3 3481-2 60	25. Certificate of Status Desired		\$8.75 Fee Re	
City & Stet	sea Rton, Fl	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added	
Zip 24 73 (171 Country	/ Zip		intry	01/	8. This corporation owes or has p	oaid the curre	ent year Int	angible
24 1	25 PAM DEAC	29	30	11/1	1 /feel	Personal Property Tax due Jur	· · · · · · · · · · · · · · · · · · ·		No
	9. Name and Address of Current	Registered Agent		2.1		10. Name and Address of New F	legistered A	gent	
	LUM, MITCHELL			81	Name				
2393 N.W. 59TH ST BOCA RATON FL 33496				82	Street Addres	ss (P.O. Box Number is Not Accept	able)		
				83					
				84	City			les Zin (Code
				04	City		FL	 85 Zip (Code
office or re agent. I a	to the provisions of Sections 607.0507 egistered agent, or both, in the State of m familiar with, and accept the obliga	of Florida. Such change was	s authorized	d by tl	named corpor he corporation	ration submits this statement for the n's board of directors. I hereby acc	purpose of c ept the appoi	changing it intment as	s registered registered
SIGNATURE	Signature, typied or printed name of registered agen	and the if applicable (No	Off Registered	d Agent	signature required	when reinstaling)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFF	ICERS AND I	DIRECTOR	S IN 12
TITLE	PT	DELETE	1.1 10	TLE				Change	☐ Addition
NAME	BLUM, MITCHELL		1.2 N/	AME.					
STREET ADDRESS	2393 N.W. 59 STREET		1.3 \$1	REET AC	DDRESS				
CITY-ST-ZIP	BOCA RATON FL		•						
			1.4 CF	TY- \$1-	ZIP		_		
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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.