

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000088626

FILED  
Jul 17, 2007  
Secretary of State

Entity Name: NEURO PSYCH DATA INTERNATIONAL, INC.

## Current Principal Place of Business:

2925 AVENTURA BLVD.  
203  
AVENTURA, FL 33180

## New Principal Place of Business:

2925 AVENTURA BLVD.  
SUITE 203  
AVENTURA, FL 33180

## Current Mailing Address:

9720 W BROADVIEW DRIVE  
BAY HARBOR, FL 33154

## New Mailing Address:

FEI Number: 65-1048541      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CARTER, ARNOLD P.  
9720 W BROADVIEW DRIVE  
BAY HARBOR, FL 33154      US

## Name and Address of New Registered Agent:

CARTER, ARNOLD P.  
9720 W BROADVIEW DRIVE  
BAY HARBOR ISLAND, FL 33154      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:

07/17/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HEYREND, F. LAMARR  
Address: 3436 BRYSON STREET  
City-St-Zip: BOISE, ID 83713

Title: VP ( ) Delete  
Name: BARS, DONALD R  
Address: 5121 N MOUNTAIN VIEW  
City-St-Zip: BOISE, ID 83704

Title: VP ( ) Delete  
Name: CARTER, ARNOLD P  
Address: 9720 W. BROADVIEW DRIVE  
City-St-Zip: BAY HARBOR, FL 33154

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ARNOLD P CARTER

VP

07/17/2007

Electronic Signature of Signing Officer or Director

Date