

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90074 016 ***150.00

DOCUMENT # P01000020503

1. Entity Name
PROFESSIONAL COUNSELING & DIAGNOSTIC INC.

Principal Place of Business

**2480 SE 7TH PLACE
 HOMESTEAD FL 33033**

Mailing Address

**2480 SE 7TH PLACE
 HOMESTEAD FL 33033**

2. Principal Place of Business

**30370 OLD DIRIE HWY
 Suite, Apt. #, etc.**

3. Mailing Address

**30370 OLD DIRIE HWY
 Suite, Apt. #, etc.**

City & State

HOMESTEAD FL

City & State

HOMESTEAD FL

4. FEI Number

65-1077876

Applied For

Not Applicable

Zip 33033

Country

Zip 33033

Country

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

JIMENEZ, BEATRIZ

1800 NW 24TH AVENUE

#101

MIAMI FL 33125

7. Name and Address of New Registered Agent

Name

LOPINTO, JOSEPH

Street Address (P.O. Box Number is Not Acceptable)

30370 OLD DIRIE HWY

City

HOMESTEAD

FL

Zip Code

33033

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)**

☐

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

**10. Election Campaign Financing
 Trust Fund Contribution.**

☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	PVST	<input checked="" type="checkbox"/> Delete
NAME	JIMENEZ, BEATRIZ	
STREET ADDRESS	1800 NW 24TH AVENUE #1010	
CITY-ST-ZIP	MIAMI FL 33033	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PVST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOPINTO, JOSEPH	
STREET ADDRESS	30370 OLD DIRIE HWY	SUITE 182
CITY-ST-ZIP	HOMESTEAD, FL 33033	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

attachment # PO1000020503/51111111

ARTICLES OF AMENDMENT

TO

ARTICLES OF INCORPORATION

OF

PROFESSIONAL COUNSELING & DIAGNOSTIC INC.

(Present name)

FILED
2002 JAN -4 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts
The following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicated articles number(s) being amended, added
Or deleted)

ARTICLE II:

The new mailing and business address of this corporation shall be:

30370 OLD DIXIE HWY SW 182
HOMESTEAD, FL 33033

REMOVE:

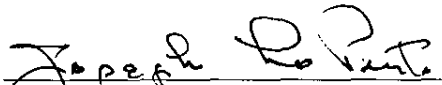
2480 SE 7TH PL
HOMESTEAD, FL 33033

ARTICLE IV:

The name and address of the new Registered Agent shall be:

JOSEPH LOPINTO
30370 OLD DIXIE HWY
HOMESTEAD, FL 33033

Having been named as registered agent and to accept service of process for the stated corporation
at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to
act in this capacity.


JOSEPH LOPINTO
Registered Agent

ARTICLE VI:

(DELETE) BEATRIZ JIMENEZ
1800 NW 24TH AVENUE #1010
MIAMI, FL 33033

(ADD) JOSEPH LOPINTO as PRESIDENT
30370 OLD DIXIE HWY
HOMESTEAD, FL 33033

attachment # PO1 000020503/516636

SECOND: If an amendment provides for an exchange, reclassification or cancellation has Issued shares, provisions for implementing the amendment if not contained in the Amendment itself, is as follows:

JOSEPH LOPINTO shall hold 100% of the shares of mentioned corporation.

THIRD: The date of each amendment's adoption: 01/02/02

FOURTH: Adoption of Amendment(s) (check one)

☐ The amendment(s) was/were adopted by the incorporation without shareholder Action and shareholder action was not required.

☐ The amendment(s) was /were adopted by the board of directors without Shareholder action and shareholder action was not required.

☒ The amendment(s) was/were approved by the shareholders. The number of votes Cast for the amendment(s) was/were sufficient for approval.

☐ The amendment (s) was/were approved by the shareholders through voting groups.

[The following statement must be separately provided for each group entitled to vote separately on the amendment (s).]

The number of votes cast for the amendment (s) was/were sufficient for
Approval by _____
(Voting group)

Signed this 2ND Day of January, 2002

Signature Joseph Lo Pinto
(By the chairman of the Board of Directors,
President or other officer if adopted by the shareholder's)

OR

(By a director if adopted by the directors)

OR

(By an incorporation if adopted by the incorporations)

JORGE MEDINA
Typed or printed name

PRESIDENT/DIRECTOR/INCORPORATOR
Title