

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000038846

FILED
Mar 27, 2004
Secretary of State

Entity Name: OCHOA PSYCHOLOGICAL SERVICES INC.

Current Principal Place of Business:

17375 COLLINS AVENUE #1602
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

16900 NORTH BAY ROAD
512
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

17375 COLLINS AVENUE #1602
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

16900 NORTH BAY ROAD
512
SUNNY ISLES BEACH, FL 33160

FEI Number: 43-2012624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OCHOA, LUCIA
17375 COLLINS AVENUE #1602
SUNNY ISLES BEACH, FL 33160

Name and Address of New Registered Agent:

OCHOA, LUCIA
16900 NORTH BAY ROAD
512
SUNNY ISLES BEACH, FL 33160

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: LUCIA OCHOA

03/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OCHOA, LUCIA
Address: 17375 COLLINS AVENUE #1602
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OCHOA, LUCIA
Address: 16900 NORTH BAY ROAD #512
City-St-Zip: SUNNY ISLES BEACH, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LUCIA OCHOA

PD

03/27/2004

Electronic Signature of Signing Officer or Director

Date