

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State

03-24-2004 90006 032 ***150.00

DOCUMENT # P03000056223 1. Entity Name THE ADHD EVALUATION CENTER, INC.																													
Principal Place of Business 2430 ESTANCIA BLVD STE 201 CLEARWATER, FL 33761			Mailing Address 2430 ESTANCIA BLVD STE 201 CLEARWATER, FL 33761																										
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																										
City & State			City & State																										
Zip		Country		Zip																									
4. FEI Number 02-069333				Applied For ☐ Not Applicable																									
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required																									
6. Name and Address of Current Registered Agent ZAKEN-GREENBERG, FLORA 2430 ESTANCIA BLVD STE 201 CLEARWATER, FL 33761				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																									
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2004, Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																										
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 40%;">D</td> <td style="width: 10%; text-align: right;">☐ Delete</td> </tr> <tr> <td>NAME</td> <td>ZAKEN-GREENBERG, FLORA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>2430 ESTANCIA BLVD STE 201</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>CLEARWATER, FL 33761</td> <td></td> </tr> </table>			TITLE	D	☐ Delete	NAME	ZAKEN-GREENBERG, FLORA		STREET ADDRESS	2430 ESTANCIA BLVD STE 201		CITY-ST-ZIP	CLEARWATER, FL 33761		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 40%;"></td> <td style="width: 10%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>			TITLE		☐ Change ☐ Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																													
SIGNATURE <u><i>Flora Zaken-Greenberg</i></u> 3/22/04 727-791-8802 SIGNATURE AND OFFICE OF PERSON MAKING OF SECRETARY OF STATE																													