

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000069832

**FILED**  
**Feb 26, 2006**  
**Secretary of State**

**Entity Name:** ALONSO PSYCHOLOGICAL CORP.

**Current Principal Place of Business:**

13880 S.W. 62ND TERRACE  
MIAMI, FL 33183

**New Principal Place of Business:**

22056 SW 131 PLACE  
MIAMI, FL 33170

**Current Mailing Address:**

13880 S.W. 62ND TERRACE  
MIAMI, FL 33183

**New Mailing Address:**

22056 SW 131 PLACE  
MIAMI, FL 33170

**FEI Number:** 20-1063034

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALONSO, ERIK  
13880 S.W. 62ND TERRACE  
MIAMI, FL 33183 US

**Name and Address of New Registered Agent:**

ALONSO, ERIK  
22056 SW 131 PLACE  
MIAMI, FL 33170 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: ERIK X. ALONSO

02/26/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PVST ( ) Delete  
Name: ALONSO, ERIK  
Address: 13880 S.W. 62ND TERRACE  
City-St-Zip: MIAMI, FL 33183

Title: D (X) Delete  
Name: ALONSO, ERIK  
Address: 13880 S.W. 62ND TERRACE  
City-St-Zip: MIAMI, FL 33183

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PVST (X) Change ( ) Addition  
Name: ALONSO, ERIK  
Address: 22056 SW 131 PLACE  
City-St-Zip: MIAMI, FL 33170

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ERIK X. ALONSO

DR.

02/26/2006

Electronic Signature of Signing Officer or Director

Date