

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000080210

FILED
May 08, 2007
Secretary of State

Entity Name: ROZANA ZAIFER-SIMS, PSY. D, P.A.

Current Principal Place of Business:

7301 WEST PALMETTO PARK RD
SUITE 210L
BOCA RATON, FL 33433

New Principal Place of Business:

7301 WEST PALMETTO PARK RD
SUITE 210C
BOCA RATON, FL 33433

Current Mailing Address:

3961 A COCOPLUM CIR
COCONUT CREEK, FL 33063

New Mailing Address:

FEI Number: 20-1070434

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZAIFER-SIMS, ROZANA
3961 A COCOPLUM CIR
COCONUT CREEK, FL 33063 US

Name and Address of New Registered Agent:

ZAIFER-SIMS, ROZANA DR.
3961 A COCOPLUM CIR
COCONUT CREEK, FL 33063 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: ROZANA ZAIFER-SIMS, PSY.D., P.A.

05/08/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ZAIFER-SIMS, ROZANA
Address: 3961 A COCOPLUM DR
City-St-Zip: COCONUT CREEK, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ZAIFER-SIMS, ROZANA DR.
Address: 3961 A COCOPLUM DR
City-St-Zip: COCONUT CREEK, FL 33063

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: ROZANA ZAIFER-SIMS, PSY.D., P.A.

PD

05/08/2007

Electronic Signature of Signing Officer or Director

Date