

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000098527

**FILED**  
**Apr 27, 2007**  
**Secretary of State**

**Entity Name:** BRENDA I. RIVERA, PSY. D., P.A.

**Current Principal Place of Business:**

10850 S.W. 113TH PLACE  
SUITE #112  
MIAMI, FL 33176 US

**New Principal Place of Business:**

**Current Mailing Address:**

10850 S.W. 113TH PLACE  
SUITE #112  
MIAMI, FL 33176 US

**New Mailing Address:**

18042 SW 144 COURT  
MIAMI, FL 33177 US

**FEI Number:** 87-0777169

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIVERA, BRENDA I PSY. D.  
10850 S.W. 113TH PLACE  
SUITE #112  
MIAMI, FL 33176 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: RIVERA, BRENDA I PSY. D.  
Address: 10850 S.W. 113TH PLACE, SUITE #112  
City-St-Zip: MIAMI, FL 33176 US

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

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

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: BRENDA I. RIVERA

P

04/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date