

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000025549

FILED
Apr 16, 2009
Secretary of State

Entity Name: PSYCH THERAPEUTIC GROUP INC

Current Principal Place of Business:

7495 WEST 22 AVE
205
HIALEAH, FL 33016 US

Current Mailing Address:

7495 WEST 22 AVE
205
HIALEAH, FL 33016 US

FEI Number: 65-3173666

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

7497 WEST 22 AVE
205
HIALEAH, FL 33016 US

New Mailing Address:

7497 WEST 22 AVE
205
HIALEAH, FL 33016 US

Name and Address of Current Registered Agent:

HERNADEZ, CARIDAD
7495 WEST 22 AVE
205
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

HERNADEZ, CARIDAD
7497 WEST 22 AVE
205
HIALEAH, FL 33016 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: CARIDAD HERNANDEZ

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HERNANDEZ, CARIDAD
Address: 7495 WEST 22 AVE APT 205
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HERNANDEZ, CARIDAD
Address: 7497 WEST 22 AVE APT 205
City-St-Zip: HIALEAH, FL 33016

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: CARIDAD HERNANDEZ

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date