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PROFIT CORPORATION ANNUAL REPORT

1996

Corporation Name

CITY - ST-ZIP

STREET ADDRESS

STREET ADDRESS

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STREET ADDRESS

CITY - ST - ZIP

CITY - ST- ZIP

CHTY - ST - 71P

TITLE

NAME

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NAME



FLORIDA DEPARTMENT OF STATE

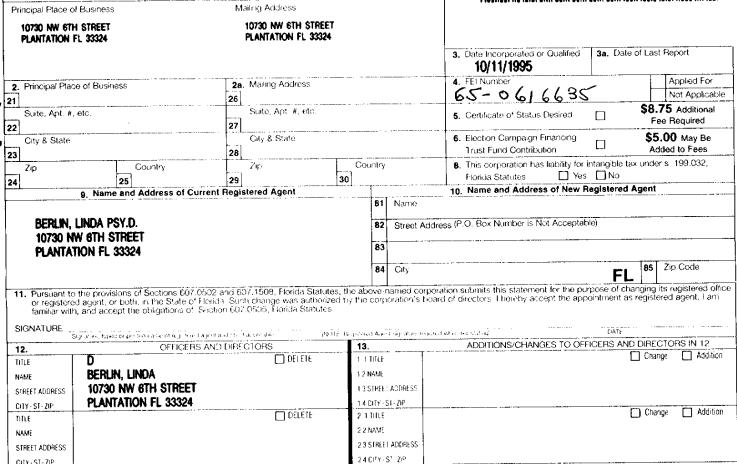
Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P95000077913 (8) **DOCUMENT #**

LINDA BERLIN PSY.D., P.A.



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CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k), Fiorida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 comparation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block

3 1 Hile

3.2 NAME

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3.3 STREET ADDRESS

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5.4 CITY - \$1 - ZIP

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SIGNATUR OFFICER OR DIRECTOR

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