

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000088030 (8)**

1. Corporation Name

PSYCHSOLUTIONS NETWORK, INC.



Principal Place of Business

**520 BRICKELL KEY DRIVE
SUITE 0-305
MIAMI FL 33131**

Mailing Address

**520 BRICKELL KEY DRIVE
SUITE 0-305
MIAMI FL 33131**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

11/16/1995

3a. Date of Last Report

4. FET Number

65-0642590

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**FREEMAN, STEPHEN A
520 BRICKELL KEY DRIVE
SUITE 0-305
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent or new registered agent (if applicable) (If applicable, Registered Agent Signature required when not filing)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

D

NAME

FREEMAN, STEPHEN A

STREET ADDRESS

520 BRICKELL KEY DR. #0-305

CITY - ST - ZIP

MIAMI FL 33131

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY - ST - ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY - ST - ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY - ST - ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY - ST - ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

PD

Scott Roseman

520 Brickell Key Drive, Suite 0-305

Miami, Florida 33131

VP, T D

Arthur Bergman

520 Brickell Key Drive, Suite 0-305

Miami, Florida 33131

VP, S D

Micheal Felsher

520 Brickell Key Drive, Suite 0-305

Miami, Florida 33131

VP

William Allen

520 Brickell Key Drive, Suite 0-305

Miami, Florida 33131

SIGNATURE:

Scott Roseman

Scott Roseman

4/26/96

(305) 595-6500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)