

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 20, 2002 8:00 am
Secretary of State05-20-2002 90181 001 ***150.00
05-20-2002 90181 002 *****8.75**DOCUMENT # P97000004530****1. Entity Name**
COUNSELING & HYPNOSIS ASSOCIATES, INC.**Principal Place of Business****300 BISCAYNE BLVD. WAY**
STE. 1007
MIAMI FL 33131**Mailing Address****300 BISCAYNE BLVD. WAY**
STE. 1007
MIAMI FL 33131**2. Principal Place of Business****3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number**65-0720505**

Applied For

Not Applicable

5. Certificate of Status Desired**\$8.75 Additional**
Fee Required**6. Name and Address of Current Registered Agent****PADRON, FELIX O**
300 BISCAYNE BLVD. WAY
STE. 1007
MIAMI FL 33131**7. Name and Address of New Registered Agent**

Name

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

City

FL

Zip Code

8. 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**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

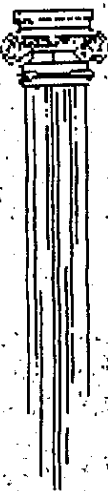
9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing**
Trust Fund Contribution. ☐**\$5.00 May Be**
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition**TITLE** ☐ Delete
NAME **P**
STREET ADDRESS **PADRON, FELIX O**
CITY-ST-ZIP **300 BISCAYNE BLVD., STE. 107**
MIAMI FL 33131**TITLE** ☐ Delete
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CITY-ST-ZIP**TITLE** ☐ Delete
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CITY-ST-ZIP**TITLE** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP**13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.****SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)



Counseling & Hypnosis Associates, Inc.

Dade County
300 Biscayne Blvd. Way
Suite 1007
Miami, FL 33131
Office: (305)373-0843
Fax: (305)373-1937

Broward County
1918 Harrison Street
Suite 101
Hollywood, FL 33020
Office: (954)921-0063
Fax: (305)373-1937

Palm Beach County
200 W. Camino Real
Suite 200B
Boca Raton, FL 33432
Office: (561)394-8860
Fax: (305)373-1937

April 27th, 2002

Attachment

P9700004530

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: 2002 Uniform Business Report (UBR)

To Whom It May Concern:

I would like to inform your office about the reason for my tardiness in submitting the UBR.

For the last several weeks I have been seriously involved in the care of a hospitalized elderly aunt. I am her legal guardian and as such am required to make several visits to authorize new medications and/or treatments.

It is a very involved process. As a result of several complications that she has suffered, my mind was drawn away from important matters in the office. One such matter was the timely submission of this report.

I am humbly requesting that you process my UBR and not impose the late fees. Please excuse any inconvenience that this may cause.

If you have any questions, please contact me at 305-373-0843. Thank you, in advance for your time and consideration.

Sincerely,

Felix O. Padron, LMHC

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