

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0066676

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **P97000082657 (2)**
1. Corporation Name

KAREN E. ENGBRETSSEN-LARASH, PSY.D., P.A.

FILED

98 JUL 21 AM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/24/1997

4. FEI Number
65-0782748

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

Principal Place of Business
**3526 SOUTHWOOD COURT
DAVIE FL 33328**

Mailing Address
**3526 SOUTHWOOD COURT
DAVIE FL 33328**

2. Principal Place of Business

21 15 Southeast 9th Avenue

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

City & State

23 Ft. laud., FL

City & State

28

Zip

24 33301

Country

25 Broward

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**HOLLAND, JANICE B
2844 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065**

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **ENGBRETSSEN-LARASH, KAREN E**
STREET ADDRESS **3526 SOUTHWOOD COURT**
CITY-ST-ZIP **DAVIE FL 33328**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
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CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME **400002598444-0**
1.3 STREET ADDRESS **-07/24/98-01102-006**
1.4 CITY-ST-ZIP ******150.00 ****150.00**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE

Karen E. Engbretsen-Larash, Psy.D., P.A.

954-779-2855

CR2E034 (5/98)

COPY

Karen E. Engebretsen-Larash, Psy.D., P.A.

Licensed Psychologist

FL Lic: PY5409

15 S.E. 9th Avenue
Ft. Laud., FL 33301
Ofc: (954) 779-2855
Fax: (954) 424-3469

4801 S. University Drive, Suite 270
Davie, FL 33328
Ofc: (954) 680-9884
Email: drkaren@earthlink.net

Division of Corporations
Annual Reports Filings
P.O. box 1500
Tallahassee, FL 32302-1500

ATTN: To whom it may concern:


July 01, 1998

As per the conversation with Robin Easom today, this correspondence is being sent along with a copy of the ORIGINAL 1998 Profit Corporation Annual Report which was mailed on April 15, 1998 (along with a \$150 ck no. 1076). When the 2nd Notice for the Annual Report was received, my office manager called to determine if my application ever had been received. (Since I do not check my bank statement on a monthly basis, I did not realize that the check had not been cashed).

Due to the recent deaths of my brother and father, it has been a challenge to keep up with the day-to-day operations of my practice, let alone those extra details that one does not think about on a daily basis. Therefore, I hope you will accept a duplicate check for \$150 and process the paperwork as if it had been received by the deadline since the original application was mailed on time.

Since you did not receive check number 1076 for \$150, I have placed a stop payment on the check. Should it find the way to your office, please return it to me at the above listed address. If you have any further questions, please do not hesitate to contact me at (954) 779-2855. Thank you for your attention to this matter.

Regards,



Karen E. Engebretsen-Larash, Psy.D., P.A.