## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000066148

WESTON, FL 33326

City-St-Zip:

Entity Name: OPEN MIND, INC., A BILINGUAL PSYCHOLOGICAL CENTER

FILED Jan 18, 2008 Secretary of State

**New Principal Place of Business: Current Principal Place of Business:** 318 INDIAN TRACE #408 WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** 318 INDIAN TRACE #408 WESTON, FL 33326 FEI Number: 65-0854691 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SZPEKTOR, SARA SZPEKTOR, SARA 729 HERITAGE WAY 6051 N OCEAN DR WESTON, FL 33326 US HOLLYWOOD, FL 33019 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: 01/18/2008 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SZPEKTOR, SARA Name: Name: 318 INDIAN TRACE PMB 408 Address: Address: City-St-Zip: WESTON, FL 33326 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition Name: GUTMAN, DANIEL Name: Address: 318 INDIAN TRACE PMB 408 Address:

City-St-Zip:

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: DANIEL GUTMAN	VP	01/18/2008
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