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).

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # S07171

(9)

PSYCHOLOGICAL RESOURCES, INC.

**FILED** Aug 19 1998 8:00am Secretary of State

72 AW NE JUNE RO. 9543  MAMN FL 30126  AMMIN FL 30126  A SET Number  A SET							¶
MAMI FL 33128    AMAIR FL 33128	Principal Place of Business Mailing Address						
2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 2. Mailing Address 3. Date Incorporated or Qualified 10/16/1990 3. Date Place of Business 2. Mailing Address 3. Certificate of Status Desired				#543			
10/16/1980   10/16/1980   2   10/16/19			MINIMIN 1 & 00120			DO NOT WRITE IN	THIS SPACE
Sulfa, Apl. #, etc.    Sulfa, Apl. #, etc.							
Suite, Apl. #, efc.    Suite, Apl. #, efc.   Suite, Apl. #, efc.   Suite, Apl. #, efc.   S. Carificate of Status Dosind   \$6.75 Additional Fee Required Fee Required Fee Required   \$5.00 May 86 Addoor to Fee Required   \$6.00 May 86 Addoor to Fee Required   \$6.0	2. Principal Place of Business 2a. Mailing Address					, ,	Applied For
22   27   28   28   28   28   28   28	21 26		26			65-0226391	Not Applicable
Zip   County   Zip   County   Zip   County   B. This copprehion owes or has paid the current year interplable   Personal Property Tax due June 20.   Yes   No   Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   DANGER, IVAN   12450 S.W. 25TH ST.   MIAMI Ft. 33175   83	a		1	etc.		5. Certificate of Status Desired	
Zip	·	∤ -·₁					
DANGER, IVAN 12450 S.W. 25TH ST. MIAMI FL 33175  41 City  FL 85 Zip Codo  41. Pursuant to the provisions of sections 607.0502 and 507.1508. Ficrida Statutes. the above named corporation submits this statement for the purpose of changing its registered agent, or polit, in the Stato of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent, or polit, in the Stato of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent, or polit, in the Stato of Fiorida. Statutes.  SIGNATURE  Discolute, types of changing its registered agent on this registered of 07.0502 fiorida Statutes.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  11. Intel  12. PD  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  12. NAME  FERIA, PAUL, PHD.  12. YAME  22. TITLE  13. TITLE  14. TITLE  15. TI	Zip	firm f	}·( `	t	ry		
DANGER, DAN BT.  12450 S.W. 25TH ST.  MIAMI FL 33175  14 City  FL 85 Zip Code  11. Pursuant to the provisions of sections 607,0502 and 607,1508, Florida Statutes, the ebove-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section 607,0505, Florida Statutes, the ebove-named corporation submits this statement for the purpose of changing its registered of section 607,0505, Florida Statutes, the ebove-named corporation submits this statement for the purpose of changing its registered of the corporation in the provision of sections of corporations of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation submits this statement for the purpose of changing its registered of corporation statement for the purpose of corporation and corporation submits this statement for the purpose of corporation and corpor		and the company of the control of th	and an extension of the contract of the contra			10. Name and Address of New Regist	ered Agent
MIAMI FL 33175    63					1 Name		
B3				E	Street Ac	ddress (P.O. Box Number is Not Acceptable)	
### 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 eigent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered signal. I am familiar with, and accept the obligations of, section 607,000. Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD	*****	72 50174		ξ	3		
11. Pursuant to the provisions of sections 607.0502 and 607.1508. Florida Statules, 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. Thereby accept the appointment as registered office or registered agent, problem, and accept the obligations of, section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PD					4		1007 700 0000
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section of 07.0505, Florida Statutes.  SIGNATURE  Signalure, tyred or prince have of registered agent and thin Parphicable. (NOTE Registered Agent signalure required when remarkfing).  DELETE  1.3 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD  OFFICERS AND DIRECTORS  1.3 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  1.11/ILE  STREET ADDRESS  CITY-ST-ZIP  MAMI FL  33. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  1.11/ILE  Change Addition  Addition  1.2 NAME  1.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DANGER, IVAN, PHD.  2.2 NAME  2.2 STREET ADDRESS  CITY-ST-ZIP  TITLE  VALDES, ORLANDO, PHD.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  1.11/ILE  1.11/ILE  1.11/ILE  1.11/ILE  1.12/INA  1.13 STREET ADDRESS  2.11/Y-ST-ZIP  CHANGER, IVAN, PHD.  2.2 NAME  2.2 STREET ADDRESS  CITY-ST-ZIP  TITLE  VALDES, ORLANDO, PHD.  1.3 STREET ADDRESS  2.11/Y-ST-ZIP  1.11/ILE  1.2 INA  2.2 NAME  3.3 STREET ADDRESS  2.11/Y-ST-ZIP  1.11/ILE  1.2 INA  2.2 NAME  3.3 STREET ADDRESS  2.11/Y-ST-ZIP  1.11/ILE  1.2 NAME  3.3 STREET ADDRESS  2.11/Y-ST-ZIP  1.11/ILE  1.2 NAME  3.3 STREET ADDRESS  2.11/Y-ST-ZIP  1.11/ILE  1.2 NAME  3.3 STREET ADDRESS  2.11/Y-ST-ZIP  1.11/ILE				}*	City		FL 85 Zip Code
TITLE		Signature, typed or printed name of registered			i Agent signalure i		
NAME   FERIA, PAUL, PHD.   1.2 NAME					· · · · · · · · · · · · · · · · · · ·	11,501,101,010,110,120,10 01,110,121	
STREET ADDRESS   STREET ADDRESS   STREET ADDRESS		' -					C origings C reaction
MIAMI FL 33173		AAAA A III AATII AT		1.3 STRE	ET ADDRESS		(
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12450 S.W. 25TH ST		SD	DELETE	2.1 TITLE			Change Addition
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ITLE DELETE 61 TITLE Change Addition				5.3 \$7RE	FT ADDRESS		Change Addition

4. 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 ecciver 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 allachment with an address.

6.4 CITY-ST-2IP

IGNATURE:

AME TREET ADDRESS TY-ST-ZIP