FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90065 041 ***150.00

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PROFIT C()RPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V05926 1. Corporation Name

BEE AND WISE PSYCHOLOGICAL TESTING SERVICES, P.A

Principal Place	of Business	Mailing Address								
3716 UNIVERSITY BLVD. SOUTH		3716 UNIVERSITY BLVD. SOUTH								
SUITE 6		SUITE 6			DO NOT WRITE IN THIS SPACE					
JACKSONVILLE FL 32216		JACKSONVILLE FL 32216			3. Date Incorporated or Qualifed					
						01/13/1992				
2 Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Ι.	Appl	ied For
21		26			59-3101007 Not			Not	Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5 Contifer to of Status Decired \$8.75 Additional				iditional	
22		27				5. Certifc ate of Status Desired		Fe	e Rec	uired
City & State		City & State			6. Election Campaign Financing \$5.00 May Be					
23		28			Trust Fund Contribution		Add	ded to	Fees	
Zip	Country	Zip	Col	untry		8. This corporation owes the current	year n	engible		_
24	25	29	30			Persor al Property Tax.		Yes	1]No
	9. Name and Address of Curren	t Registered Agent		ļ.,,		10. Name and Address of New Reg	istere d	Agent		
DEE	1/41			81	Name					
BEE,				82	Street Ac	dress (P.O. Box Number is Not Acceptable	e) —			
3716 UNIVERSITY BLVD,S										
SUITE 6				83						
JAUN	SONVILLE FL 32257			84	City			85	Zip C	ode
					Ť		FL			
office or re	to the provisions of Sc ctions 607.050 egistered agent, or bo h, in the State m familiar with, and accept the obliga	of Florida. Such change was	: ::uthorize	d by i	the corpora	rporation submits this statement for the pution's board of cirectors. I hereby accept the	ne appoi	ntment a	s reg	stered
SIGNATURE							DATE			
	Signature, typed or printed name of registered age	[) DIRECTORS	13.		signature requ	ADDITIONS/CHANGES TO OFFICE		ID DIRE	CTOF	S IN 12
TITLE	D OF FOLKS AN	DELETE	1.1 T			ADDITIONAL OF MICE TO STATE		Cha		Addition
	U									
MALIE	RFF VAI		12 N	IAME						
NAME	BEE, VAL 4823 MARSH HAMMOCK DR F		1.2 N		ADDRESS					
STREET ADDRE 3S	4823 MARSH HAMMOCK DR E		1.3 \$	TREET	ADDRESS					
STREET ADDRE ;S CITY-ST-ZIP	-		1.3 S	TREET	1			☐ Cha	inge	Addition
STREET ADDRE 3S CITY-ST-ZIP TITLÉ	4823 MARSH HAMMOCK DR E	☐ DELETE	1.3 \$ 14 C 2.1 T	TREET CITY-SI	1			☐ Cha	inge	Addition
STREET ADDRE 3S CITY-ST-ZIP TITLE NAME	4823 MARSH HAMMOCK DR E	☐ DELETE	1.3 \$ 14 C 2.1 T 22 N	TREET CITY-SI TILE IAME	T-ZIP			☐ Cha	inge	Addition
STREET ADDRE 3S CITY-ST-ZIP TITLE NAME STREET ADDRE 3S	4823 MARSH HAMMOCK DR E		1.3 \$ 14 C 2.1 T 22 N 23 \$	TREET CITY-ST TILE LAME TREET	ADDRESS			☐ Cha	inge	Addition
STREET ADDRE 3S CITY-ST-ZIP TITLE NAME STREET ADDRE 3S CITY-ST-ZIP	4823 MARSH HAMMOCK DR E	☐ DELETE	1.3 \$ 14 C 2.1 T 22 N 23 S 2.4 C	TREET CITY-ST TILE LIAME CITY-ST CITY-S	ADDRESS			☐ Cha		Addition
STREET ADDRE ;S CITY-ST-ZIP TITLE NAME STREET ADDRE ;S CITY-ST-ZIP TITLE	4823 MARSH HAMMOCK DR E		1.3 \$ 14 C 2.1 T 22 N 2.3 \$ 2.4 C 3.1 T	TREET CITY-ST TILE LIAME CITY-ST CITY-S	ADDRESS					
STREET ADDRE ;S CITY-ST-ZIP TITLE NAME STREET ADDRE ;S CITY-ST-ZIP TITLE NAME	4823 MARSH HAMMOCK DR E		1.3 \$ 14 C 2.1 T 22 N 23 \$ 2.4 C 3.1 T 32 N	TREET TITLE TREET TREET TREET CITY-S' TITLE TAME	ADDRESS T-ZIP					
STREET ADDRE ;S CITY-ST-ZIP TITLE NAME STREET ADDRE ;S CITY-ST-ZIP TITLE NAME STREET ADDRE ;S	4823 MARSH HAMMOCK DR E		1.3 \$ 14 C 2.1 T 22 N 2.3 \$ 2.4 C 3.1 T 3.2 N 3.3 \$	TREET TILE TREET CITY-S' TILE TAME TREET	ADDRESS T-ZIP ADDRESS					
STREET ADDRE ;S CITY-ST-ZIP TITLE NAME STREET ADDRE ;S CITY-ST-ZIP TITLE NAME STREET ADDRE ;S CITY-ST-ZIP	4823 MARSH HAMMOCK DR E		1.3 \$ 14 C 2.1 T 22 N 2.3 \$ 2.4 C 3.1 T 3.2 N 3.3 \$	TREET CITY-ST TILE TREET CITY-ST TILE TAME TREET CITY-ST TILE TREET CITY-ST	ADDRESS T-ZIP ADDRESS				inge	
STREET ADDRE ;S CITY-ST-ZIP TITLE NAME STREET ADDRE ;S CITY-ST-ZIP TITLE NAME STREET ADDRE ;S CITY-ST-ZIP TITLE	4823 MARSH HAMMOCK DR E	☐ DELETE	1.3 S 14 C 2.1 T 22 N 23 S 2.4 C 3.1 T 32 N 3.3 S 34 C 4.1 T	TREET CITY-ST TILE TREET CITY-ST TILE TAME TREET CITY-ST TILE TREET CITY-ST	ADDRESS T-ZIP ADDRESS			— Cha	inge	☐ Addition
STREET ADDRE SS CITY-ST-ZIP TITLE NAME	4823 MARSH HAMMOCK DR E	☐ DELETE	139 140 217 22N 235 2.46 317 32N 335 346 417	TREET OTY-ST TILE AME OTY-ST TILE LAME OTREET OTY-ST TILE NAME	ADDRESS T-ZIP ADDRESS			— Cha	inge	☐ Addition
STREET ADDRE 3S CITY-ST-ZIP TITLE NAME STREET ADDRE 3S	4823 MARSH HAMMOCK DR E	☐ DELETE	1.3 \$ 14 C 2.1 T 22 N 2.3 \$ 2.4 C 3.1 T 32 N 3.3 \$ 3.4 C 4.1 T 4.2 P 4.3 \$	TREET TITLE TREET TITLE TREET TITLE TAME TREET TITLE TIT	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP			— Cha	inge	☐ Addition
STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRE:SS CITY-ST-ZIP	4823 MARSH HAMMOCK DR E	☐ DELETE	1.3 \$ 14 C 2.1 T 22 N 2.3 \$ 2.4 C 3.1 T 32 N 3.3 \$ 3.4 C 4.1 T 4.2 P 4.3 \$	TREET TITLE IAME TREET TITLE IAME TREET TITLE TREET TITLE NAME TREET TREET	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP			— Cha	nge	☐ Addition
STREET ADDRE 3S CITY-ST-ZIP TITLE NAME STREET ADDRE 3S CITY-ST-ZIP TITLE TITLE NAME STREET ADDRE 3S CITY-ST-ZIP TITLE	4823 MARSH HAMMOCK DR E	☐ DELETE	1.3 \$ 14 C 2.1 T 22 N 2.3 S 2.4 C 3.1 T 32 N 3.3 S 3.4 C 4.1 T 4.2 P 4.3 S 4.4 C	TREET TITLE IAME STREET CITY-S' TITLE CITY-S' TITLE NAME STREET CITY-S' TITLE NAME STREET TITLE NAME STREET	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP			☐ Cha	nge	Addition
STREET ADDRE 3S CITY-ST-ZIP TITLE NAME NAME	4823 MARSH HAMMOCK DR E	☐ DELETE	1.39 14C 2.1T 22N 2.35 2.4G 3.1T 3.2N 3.35 3.4 G 4.1T 4.21 4.35 4.4C 5.1T 5.2N	TREET TITLE TAME TAME TAME TAME TAME TAME TAME TAM	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP			☐ Cha	nge	Addition
STREET ADDRE 3S CITY-ST-ZIP TITLE NAME STREET ADDRE 3S	4823 MARSH HAMMOCK DR E	☐ DELETE	1.3.9 1.4.0 2.1.7 2.2.N 2.3.5 2.4.0 3.1.7 3.2.N 3.3.5 3.4.0 4.1.7 4.2.1 4.3.5 4.4.0 5.1.7 5.2.N 5.3.8	TREET TITLE TAME TAME TAME TAME TAME TAME TAME TAM	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP			☐ Cha	nge	Addition
STREET ADDRE 3S CITY-ST-ZIP TITLE NAME NAME	4823 MARSH HAMMOCK DR E	☐ DELETE	1.3.9 1.4.0 2.1.7 2.2.N 2.3.5 2.4.0 3.1.7 3.2.N 3.3.5 3.4.0 4.1.7 4.2.1 4.3.5 4.4.0 5.1.7 5.2.N 5.3.8	TREET TITLE IAME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP			☐ Cha	inge	Addition
STREET ADDRE 3S CITY-ST-ZIP TITLE NAME STREET ADDRE 3S CITY-ST-ZIP	4823 MARSH HAMMOCK DR E	☐ DELETE	1.3.9 1.4.0 2.1.7 2.2.N 2.3.5 2.4.0 3.1.7 3.2.N 3.3.5 3.4.0 4.1.7 4.2.1 4.3.5 4.4.0 5.1.7 5.2.N 5.3.8 6.4.0 6.1.7	TREET TITLE IAME	ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP			Cha	inge	Addition Addition

14. 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 a secure 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 attach nent with an address, with a lighter like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

984739 3688