

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000046217

Entity Name: PSYCHOTHERAPY ASSOCIATES OF SOUTH FLORIDA, P.A.

Current Principal Place of Business:

2637 E ATLANTIC BLVD
PMB 29424
POMPANO BEACH, FL 33062-4939

Current Mailing Address:

2637 E ATLANTIC BLVD
PMB 29424
POMPANO BEACH, FL 33062-4939 US

FEI Number: 65-1105825

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KADIN, CHRISTINE
2637 E ATLANTIC BLVD
PMB 29424
POMPANO BEACH, FL 33062-4939 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name KADIN, CHRISTINE
Address EDIFICIO PALERMO DEPT 15H
AVENIDA ORDONEZ LASSO
City-State-Zip: CUENCA

Title S
Name KADIN, CHRISTINE
Address EDIFICIO PALERMO DEPT15H
City-State-Zip: CUENCA

I hereby 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 all other like empowered.

SIGNATURE: CHRISTINE KADIN

PRESIDENT

02/15/2015

Electronic Signature of Signing Officer/Director Detail

Date