

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000054152

**Entity Name:** MB PSYCHOTHERAPY INC.

**Current Principal Place of Business:**

14195 OLD SHERIDAN STREET  
SOUTHWEST RANCHES, FL 33330

**Current Mailing Address:**

14195 OLD SHERIDAN STREET  
SOUTHWEST RANCHES, FL 33330 US

**FEI Number:** 47-1279479

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BASUALDO, MARIA  
14195 OLD SHERIDAN STREET  
SOUTHWEST RANCHES, FL 33330 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            PRESIDENT

Name            BASUALDO, MARIA

Address        14195 OLD SHERIDAN STREET

City-State-Zip:    SOUTHWEST RANCHES FL 33330

*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:** MARIA BASUALDO

**OWNER**

**01/09/2021**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date