

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000015909

**Entity Name:** AMERICAN MEDPSYCH NETWORK, P.A.

**Current Principal Place of Business:**

SUITE 107  
105 E 34RTH STREET  
NEW YORK, NY 10016

**Current Mailing Address:**

105 E 34TH ST  
SUITE 107  
NEW YORK, NY 10016 US

**FEI Number:** 83-3728488

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            DE VILLA, REMBERT  
Address        105 E 34TH ST  
                  SUITE 107  
City-State-Zip: NEW YORK NY 10016

Title            CORPORATE SECRETARY  
Name            MARKOW, LESLIE  
Address        105 E 34TH ST  
                  SUITE 107  
City-State-Zip: NEW YORK NY 10016

*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:** LESLIE MARKOW

**COPORATE SECRETARY    02/09/2023**

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

\_\_\_\_\_  
Date