

**2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000034305

**Entity Name:** COMMUNITY CENTER MENTAL HEALTH INC

**Current Principal Place of Business:**

20103 SW 103 AVE  
CUTLER BAY, FL 33189

**Current Mailing Address:**

20103 SW 103 AVE  
CUTLER BAY, FL 33189 US

**FEI Number: 83-4435586**

**Certificate of Status Desired: No**

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

RODRIGUEZ FINALET, NERIEL  
20103 SW 103 AVE  
CUTLER BAY, FL 33189 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            P  
Name            RODRIGUEZ FINALET, NERIEL  
Address        20103 SW 103 AVE  
City-State-Zip: CUTLER BAY FL 33189

*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: RODRIGUEZ FINALET , NERIEL**

**PRESIDENT**

**04/30/2022**

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

\_\_\_\_\_  
Date