## 2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000044875

**Entity Name: PSYCARE NEUROMETRICS INC** 

**Current Principal Place of Business:** 

7540 DUNCREST ROAD LAKE WORTH. FL 33467

**Current Mailing Address:** 

7540 DUNCREST ROAD LAKE WORTH, FL 33467 US

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GEBELOFF, STEPHEN B ESQ 6971 N FEDERAL HWY BOCA RATON, FL 33487 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

FILED Feb 27, 2025

**Secretary of State** 

4540935194CC

Officer/Director Detail:

Title P Title 5

NameMISDRAJI, ESTHERNameMISDRAJI, ESTHERAddress7540 DUNCREST ROADAddress7540 DUNCREST ROADCity-State-Zip:LAKE WORTH FL 33467City-State-Zip:LAKE WORTH FL 33467

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: ESTHER MISDRAJI

Electronic Signature of Signing Officer/Director Detail

PRESIDENT 02/27/2025

Date