2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22000006872

Entity Name: PSYCHIATRIC NURSE PRACTITIONER INC.

y Name. PSTCHIATRIC NORSE PRACTITIONER

Current Principal Place of Business:

333 SE 2ND AVE., STE. 2000 MIAMI, FL 33131

Current Mailing Address:

333 SE 2ND AVE., STE. 2000 MIAMI, FL 33131 US

FEI Number: 83-4425319 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VOGEL, LEVI 9507 NW 38TH ST. CORAL SPRINGS, FL 33065 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 Jan 31, 2024

Secretary of State

7428853610CC

Officer/Director Detail:

Title PRESIDENT Title VP

Name GANNON, BRIGHID A Name DHILLON-CHATTHA, PRITMA
Address 191 ORCHARD ST., APT. 4D Address 1412 PROSPECT AVE. SW

City-State-Zip: NEW YORK NY 10002 City-State-Zip: CALGARY, AB T2T 0X6 CANADA AL

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: BRIGHID GANNON

PRESIDENT

01/31/2024 Date