

STATE OF CALIFORNIA

CORPORATION

Office of the Secretary of State

STATEMENT OF INFORMATION

BA20241900836

B3148-2075 10/26/2024

3:02

PM Received

уq

California Secretary of

State

For Office Use Only



File No.: BA20241900836

CLIFFORT	California Sec 1500 11th Stre Sacramento, ((916) 657-544	eet California 95814		File No.: BA20241900836 Date Filed: 10/26/2024
Entity Details Corporation Nam	e		Miriam R. Winthrop MD, Prof	essional Corporation
Entity No.			6429072	
Formed In			CALIFORNIA	
Street Address of Princi	pal Office of Corp	oration		
Principal Address			515 E MICHELTORENA ST STE D SANTA BARBARA, CA 93103	
Mailing Address of Corp	ooration			
Mailing Address			515 E MICHELTORENA ST, STE D SANTA BARBARA, CA 93103	
Attention				
Street Address of Califo Street Address of			None	
Officers				
Officer Name		Officer Address	Position(s)	
+ Miriam R Winthrop Haber		515 E MICHELTORENA ST STE D SANTA BARBARA, CA 93103	Chief Executive Officer, C	hief Financial Officer, Secretary
Additional Officers				
Officer Name		Officer Address None E	Position	Stated Position
		NOTE		
Directors				
Director Name			Director Address	
+ Miriam R Winthrop Haber			515 E MICHELTORENA ST STE D SANTA BARBARA, CA 93103	
The number of va	acancies on Bo	pard of Directors is: 0		
Agent for Service of Pro	00000			
Agent Name			Miriam Winthrop Haber	
Agent Address			515 E MICHELTORENA ST	
			STE D SANTA BARBARA, CA 9310	3
Type of Business				
Type of Business			Outpatient Psychiatric Praction	ce
Email Notifications Opt-in Email Notifications			Yes, I opt-in to receive entity notifications via email.	

No Officer or Director of this Corporation has an outstanding Enforcement or a court of law, for which no appeal therefrom provision of the Labor Code.				
Electronic Signature				
By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.				
Miriam Winthrop Haber	10/26/2024			
Signature	Date			