

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000058451

**Entity Name:** BENEDICT P. KUEHNE, P.A.

**Current Principal Place of Business:**

100 SOUTHEAST SECOND STREET  
SUITE 3105  
MIAMI, FL 33131-2154

**Current Mailing Address:**

100 SOUTHEAST SECOND STREET  
SUITE 3105  
MIAMI, FL 33131-2154 US

**FEI Number:** 26-0239827

**Certificate of Status Desired:** Yes

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

KUEHNE, BENEDICT P  
100 S.E. 2D STREET  
SUITE 3105  
MIAMI, FL 33131-2154 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 KUEHNE, BENEDICT P  
Address 100 S.E. 2D STREET, SUITE 3105  
City-State-Zip: MIAMI FL 33131-2154

Title TREASURER  
Name KUEHNE, BENEDICT P  
Address 100 SE 2 STREET, SUITE 3105  
City-State-Zip: MIAMI FL 33131

Title S  
Name KUEHNE, BENEDICT P  
Address 100 S.E. 2D STREET, SUITE 3105  
City-State-Zip: MIAMI FL 33131-2154

Title DIRECTOR  
Name KUEHNE, BENEDICT P  
Address 100 SE 2 STREET, SUITE 3105  
City-State-Zip: MIAMI FL 33131

*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:** BENEDICT P KUEHNE

**PRESIDENT**

**03/02/2024**

Electronic Signature of Signing Officer/Director Detail

Date