

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 414364

1. Entity Name
KUNDE, SPRECHER & ASSOCIATES, INC.

FILED
Mar 02, 2000 8:00 am
Secretary of State
03-02-2000 90190 015 ***158.75

Principal Place of Business
7300 N. KENDALL DR.
SUITE 400
MIAMI FL 33156
US

Mailing Address
7300 N. KENDALL DR.
SUITE 400
MIAMI FL 33156-7854
US

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip

City & State
Zip

4. FEI Number **59-1431362**
Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
SPRECHER, ROBERT C
7300 N. KENDALL DR.
SUITE 400
MIAMI FL 33156

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> Delete
NAME	SPRECHER, ROBERT
STREET ADDRESS	7300 N. KENDALL DR.
CITY - ST - ZIP	MIAMI FL 33156
TITLE	SVPD <input type="checkbox"/> Delete
NAME	HEDRICK, ZENNON
STREET ADDRESS	7300 N. KENDALL DRIVE
CITY - ST - ZIP	MIAMI FL 33156
TITLE	SVPD <input type="checkbox"/> Delete
NAME	JUNKIN, WILLIAM
STREET ADDRESS	7300 N. KENDALL DRIVE
CITY - ST - ZIP	MIAMI FL 33156
TITLE	ASD <input type="checkbox"/> Delete
NAME	OLIVARES, LUIS LUIS
STREET ADDRESS	7300 N. KENDALL DRIVE
CITY - ST - ZIP	MIAMI FL 33156
TITLE	SVP <input type="checkbox"/> Delete
NAME	OLIVER, JAMES(RICK)
STREET ADDRESS	7300 N. KENDALL DRIVE
CITY - ST - ZIP	MIAMI FL 33156
TITLE	VP <input type="checkbox"/> Delete
NAME	WEYDAHL, SVEN
STREET ADDRESS	7300 N. KENDALL DRIVE
CITY - ST - ZIP	MIAMI FL 33156

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: ROBERT C. SPRECHER **REQUIRED** 2/15/00 305-279-2298
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)