

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J07055

1. Entity Name

WILISCH-HUTTOE & ASSOCIATES, INC.

FILED
Jan 24, 2000 8:00 am
Secretary of State

01-24-2000 90066 034 ***150.00

Principal Place of Business

1500 SAN REMO
STE 110
CORAL GABLES FL 33146
US

Mailing Address

8486 SW 138 TERR
P.O. BOX 160101 33116
MIAMI FL 33158-1084
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2663149

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILISCH, THEODORE
8486 SW 138 TERR
MIAMI FL 33158

Name

Jacqueline Huttoe Wilisch

Street Address (P.O. Box Number is Not Acceptable)

8486 S.W. 138 Terrace

City

Miami

FL

Zip Code

33158

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

Signature, typed or printed name of registered agent and title if applicable

Jacqueline Huttoe Wilisch

January 13, 2000

(NOTE: Registered Agent signature required when reinstating)

DATE

President

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PS ☐ Delete
NAME WILISCH, JACQUELINE H.
STREET ADDRESS 8486 SW 138 TERR
CITY-ST-ZIP MIAMI FL 33158

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

13. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jacqueline Huttoe Wilisch, President

Date

305-667-4815

Daytime Phone #

Jan. 13, 2000