DOCUMENT # P95000082477

1. Entity Name

KANDEL & ASSOCIATES, INC.

Principal Place of Business

Mailing Address

6963 VERDE WAY NAPLES FL 34108 US

6963 VERDE WAY NAPLES FL 34108-7517 US

2000 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 29, 2000 8:00 am Secretary of State

02-29-2000 90161 048 ***150.00



2. Principal Place of Business Suite, Apt. #, etc. City & State		3. Mailing Address Suite, Apt. #, etc. City & State				
				DO NOT WRITE IN THIS SPACE		
				4. FEI Number 65-0621312 Applied For Not Applicable		
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required		
	6. Name and Address of Current F	legistered Agent		7. Name and Address of New Registered Agent		
			Name			
KANDEL, ANDREW 6963 VERDE WAY NAPLES FL 34108			Street Addre	Street Address (P.O. Box Number is Not Acceptable)		
			City	FL Zip Code		
	named entity submits this statement for	the purpose of changing its	s registered office or reg	gistered agent, or both, in the State of Florida.		
SIGNATURE .	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOT	E Registered Agent signature re	equired when reinstating) DATE		
			!!! FEE IS \$150.00 000 Fee will be \$550. ble to Department of			
11.	OFFICERS AND D	DIRECTORS '	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADORESS CITY-ST-ZIP	PVTS KANDEL, ANDREW 6963 VERDE WAY NAPLES FL 34108	☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP	☐ Change ☐ Additio		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Additio		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
TITLE NAME		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
STREET ADDRESS CITY-ST-ZIP			GHT-31-ZIF			

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

941-597-7432