

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000098756

1. Entity Name

CONTRACTOR ASSOCIATES INC.

**FILED**  
**Jan 18, 2000 8:00 am**  
**Secretary of State**

01-18-2000 90146 002 \*\*\*150.00

Principal Place of Business

1640 N.E. 93RD AVENUE  
PEMBROKE PINES FL 33024

Mailing Address

1640 N.E. 93RD AVENUE  
PEMBROKE PINES FL 33024-4557

2. Principal Place of Business

1640 N.W. 93RD AVE.  
Suite, Apt. #, etc.

3. Mailing Address

1640 N.W. 93RD AVE  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

PEMBROKE PINES, FL

City & State

PEMBROKE PINES, FL

4. FEI Number

65-0960467

Applied For

Not Applicable

Zip  
33024

Country  
U.S.

Zip  
33024

Country  
U.S.

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HOERCHER, RICHARD  
1640 N.E. 93RD AVENUE  
PEMBROKE PINES FL 33024

7. Name and Address of New Registered Agent

Name  
HOERCHER, RICHARD  
Street Address (P.O. Box Number is Not Acceptable)  
1640 N.W. 93RD AVE.  
City  
PEMBROKE PINES FL Zip Code  
33024

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.

(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  
NAME  
D  
HOERCHER, RICHARD  
STREET ADDRESS  
1640 N.E. 93RD AVENUE  
CITY-ST-ZIP  
PEMBROKE PINES FL 33024 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
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CITY-ST-ZIP ☐ Delete

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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

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: Richard F. Hoercher  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-10-00  
Date

954-438-1876  
954-444-4030  
Daytime Phone #

CR2E034 (9/99)