

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000056238

**Entity Name:** ALFONSO RUIZ, P.A.

**Current Principal Place of Business:**

17071 NE 20 AVENUE  
MIAMI, FL 33162

**Current Mailing Address:**

17071 NE 20 AVENUE  
MIAMI, FL 33162 US

**FEI Number:** 20-0031970

**Certificate of Status Desired:** No

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

RUIZ, ALFONSO  
17071 NE 20 AVENUE  
MIAMI, FL 33162 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            DIRECTOR  
Name            RUIZ, ALFONSO  
Address        17071 NE 20 AVENUE  
City-State-Zip: MIAMI FL 33162

*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:** ALFONSO RUIZ

**DIRECTOR**

**03/29/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date