

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000005796

**Entity Name:** RUIZ DISTRIBUTOR INC.

**Current Principal Place of Business:**

3650 NW 36TH ST  
809  
MIAMI, FL 33142

**Current Mailing Address:**

3650 NW 36TH ST  
809  
MIAMI, FL 33142 US

**FEI Number:** 81-1199901

**Certificate of Status Desired:** No

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

RUIZ RANCEL, IRAN  
3650 NW 36TH ST  
809  
MIAMI, FL 33142 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 PD  
Name RUIZ RANCEL, IRAN  
Address 3650 NW 36TH ST  
809  
City-State-Zip: MIAMI FL 33142

*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:** IRAN RUIZ RANCEL

PD

04/26/2017

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

\_\_\_\_\_  
Date