## **2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000159610

Entity Name: WILLIAM RUIZ CNMT LLC

**Current Principal Place of Business:** 

6481 W 14 AVE HIALEAH. FL 33012 Feb 26, 2014 Secretary of State CC0973613994

**FILED** 

## **Current Mailing Address:**

6481 W 14 AVE

HIALEAH, FL 33012 US

FEI Number: 46-1726565 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

RUIZ, WILLIAM 6481 W 14 AVE HIALEAH, FL 33012 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

## Authorized Person(s) Detail:

Title MGRM

Name RUIZ, WILLIAM Address 6481 W 14 AVE

City-State-Zip: HIALEAH FL 33012

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MR.

SIGNATURE: WILLIAM RUIZ

Electronic Signature of Signing Authorized Person(s) Detail

02/26/2014

Date