

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000000223

**Entity Name:** RUIZANABLE DRYWALL SYSTEMS INC.

**Current Principal Place of Business:**

8233 GATOR LANE,  
UNIT 10  
WEST PALM BEACH, FL 33411

**Current Mailing Address:**

8233 GATOR LANE,  
UNIT 10  
WEST PALM BEACH, FL 33411 US

**FEI Number:** 47-2759667

**Certificate of Status Desired:** No

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

RUIZ, PEDRO M  
46 SEMINOLE DR  
ROYAL PALM BEACH, FL 33411 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 P  
Name RUIZ, PEDRO M  
Address 46 SEMINOLE DR  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title VP  
Name RUIZ, MARCO A SR  
Address 11955 TANGERINE BLVD  
City-State-Zip: ROYAL PALM BEACH FL 33412

Title S  
Name RUIZ, JUANA M  
Address 11955 TANGERINE BLVD  
City-State-Zip: ROYAL PALM BEACH FL 33412

Title VP  
Name RUIZ, MARCO A JR.  
Address 46 SEMINOLE DR  
City-State-Zip: ROYAL PALM BEACH FL 33411

*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:** PEDRO RUIZ

**PRESIDENT**

**04/30/2020**

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

\_\_\_\_\_  
Date