

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000040322

**Entity Name:** DORALIS RUIZ P. A.

**Current Principal Place of Business:**

49 MAJORCA AVE  
APT 501  
CORAL GABLES, FL 33134

**Current Mailing Address:**

49 MAJORCA AVE  
APT 501  
CORAL GABLES, FL 33134 US

**FEI Number:** 86-3782265

**Certificate of Status Desired:** No

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

RUIZ, DORALIS  
49 MAJORCA AVE  
APT 501  
CORAL GABLES, FL 33134 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, DORALIS  
Address 49 MAJORCA AVE  
501  
City-State-Zip: CORAL GABLES FL 33134

*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:** DORALIS RUIZ

P

04/24/2023

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

\_\_\_\_\_  
Date