## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000037827

Entity Name: BMS PROCUREMENT SERVICE, INC.

**Current Principal Place of Business:** 

4000 PONCE DE LEON BLVD.

SUITE 470

CORAL GABLES, FL 33146

**Current Mailing Address:** 

4000 PONCE DE LEON BLVD. SUITE 470

CORAL GABLES, FL 33146

FEI Number: 65-0494727 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RODRIGUEZ, RUBEN 4000 PONCE DE LEON BLVD. SUITE 470 CORAL GABLES, FL 33146 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

Officer/Director Detail:

Title Title D

RODRIGUEZ, RUBEN Name Name RODRIGUEZ, RUBEN

4000 PONCE DE LEON BLVD. STE. 4000 PONCE DE LEON BLVD Address Address

CORAL GABLES FL 33146 City-State-Zip: City-State-Zip: CORAL GABLES FL 33146

Title Title D

Name RODRIGUEZ, RUBEN Name RODRIGUEZ, RUBEN

Address 4000 PONCE DE LEON BLVD 4000 PONCE DE LEON BLVD Address

City-State-Zip: CORAL GABLES FL 33146 CORAL GABLES FL 33146 City-State-Zip:

Title Title D

RODRIGUEZ, RUBEN Name RODRIGUEZ, RUBEN Name

4000 PONCE DE LEON BLVD Address Address 4000 PONCE DE LEON BLVD

City-State-Zip: CORAL GABLES FL 33146 CORAL GABLES FL 33146 City-State-Zip:

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: RUBEN RODRIGUEZ

**OWNER** 

01/25/2016

Date

**FILED** Jan 25, 2016

**Secretary of State** 

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