

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000411626

**Entity Name:** AMS REMODELING AND SERVICES LLC

**Current Principal Place of Business:**

6043 U.S. HWY 17-92 NORTH UNIT 101  
DAVENPORT, FL 33896

**Current Mailing Address:**

6043 U.S. HWY 17-92 NORTH UNIT 101  
DAVENPORT, FL 33896 US

**FEI Number:** 92-0453043

**Certificate of Status Desired:** No

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

GONZALEZ, ANDRES  
6043 U.S. HWY 17-92 NORTH UNIT 101  
DAVENPORT, FL 33896 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            AMBR  
Name            GONZALEZ, ANDRES  
Address        6043 U.S. HWY 17-92 NORTH UNIT 101  
  
City-State-Zip: DAVENPORT FL 33896

*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.*

**SIGNATURE:** ANDRES GONZALEZ

**OWNER**

**04/14/2025**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date