## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04744

Entity Name: REGIS HOUSE, INC.

**Current Principal Place of Business:** 

1250 NORTHWEST 7TH STREET SUITE 201, 209 AND 210 MIAMI, FL 33125

**Current Mailing Address:** 

1250 NORTHWEST 7TH STREET **SUITE 201** 

MIAMI, FL 33125 US

FEI Number: 59-2446131 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CASTILLO DE LA TORRIENTE, ANDRES 1250 NORTHWEST 7TH STREET SUITE 201

MIAMI, FL 33125 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: ANDRES CASTILLO DE LA TORRIENTE

01/17/2024

**FILED** Jan 17, 2024

**Secretary of State** 

3114606438CC

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Name

Title DIRECTOR Title PRESIDENT, CHAIRMAN, DIRECTOR

Name SUAREZ, PEDRO A S.J., PHD Name MENENDEZ, MANUEL ENRIQUE

12725 SOUTHWEST 6TH ST 1501 BELLA VISTA AVENUE Address Address

CORAL GABLES, FL 33156 UNITED City-State-Zip: MIAMI FL 33184

**STATES** 

CORAL GABLES FL 33156

Title DIRECTOR

CABALLERO, CARLOS

PARDO, GEORGINA Name Title CEO

6800 SOUTHWEST 73RD AVENUE CASTILLO DE LA TORRIENTE, Address Name

ANDRES J SOUTH MIAMI FL 33143

City-State-Zip: 1250 NORTHWEST 7TH STREET Address

SUITE 201

City-State-Zip:

Title DIRECTOR MIAMI FL 33125 City-State-Zip: PUENTE, ORLANDO DR. Name

Title DIRECTOR Address 8840 SOUTHWEST 97TH TERRACE

Name DE LEON DE CABALLERO, MARIANA City-State-Zip: MIAMI FL 33176

Address 6901 NORTHWEST 111 AVENUE

Title DIRECTOR City-State-Zip: DORAL FL 33178

Title DIRECTOR 6901 NORTHWEST 111 AVENUE

Address Name ABELLA, IRMA City-State-Zip: DORAL FL 33178

Address 2100 COUNTRY CLUB PRADO

CORAL GABLES FL 33134 City-State-Zip:

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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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANDRES J CASTILLO DE LA TORRIENTE CEO/EXECUTIVE 01/17/2024 DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name CONSUEGRA, ANDRES

Address 3045 VIRGINIA STREET

City-State-Zip: MIAMI FL 33133

Title DIRECTOR

Name MORENO, NIBERTO

Address 9195 SOUTHWEST 7TH STREET

200

City-State-Zip: MIAMI FL 33173

Title DIRECTOR

Name ARELLANO, JOSEPH

Address 9540 SOUTHWEST 19TH STREET

City-State-Zip: MIAMI FL 33165