

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04744

**Entity Name:** REGIS HOUSE, INC.

**Current Principal Place of Business:**

2010 N.W. 7TH STREET  
MIAMI, FL 33125

**Current Mailing Address:**

2010 N.W. 7TH STREET  
MIAMI, FL 33125 US

**FEI Number:** 59-2446131

**Certificate of Status Desired:** No

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

CASTILLO DE LA TORRIENTE , ANDRES  
2010 NORTHWEST 7TH STREET  
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

02/04/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name FERNANDEZ-CEBALLOS, JORGE  
Address 2030 SW 123 COURT  
City-State-Zip: MIAMI FL 33175

Title CHAIRMAN, DIRECTOR  
Name SUAREZ, PEDRO A S.J.,PHD  
Address 12725 SOUTHWEST 6TH ST  
City-State-Zip: MIAMI FL 33184

Title DIRECTOR  
Name MENENDEZ, MANUEL ENRIQUE  
Address 2010 N.W. 7TH STREET  
City-State-Zip: MIAMI FL 33125

Title DIRECTOR  
Name PARDO, GEORGINA  
Address 6800 SOUTHWEST 73RD AVENUE  
City-State-Zip: SOUTH MIAMI FL 33143

Title SECRETARY  
Name PIREZ, CONNIE  
Address 11495 SOUTHWEST 60TH STREET  
City-State-Zip: MIAMI FL 33173

Title CEO  
Name CASTILLO DE LA TORRIENTE,  
ANDRES J  
Address 222 MADEIRA AVENUE  
21  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name PUENTE, ORLANDO DR.  
Address 8840 SOUTHWEST 97TH TERRACE  
City-State-Zip: MIAMI FL 33176

Title DIRECTOR  
Name ANDINO, JORGE  
Address 550 OCEAN DRIVE  
City-State-Zip: KEY BISCAYNE FL 33149

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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 CASTILLO DE LA TORRIENTE

CEO/EXECUTIVE  
DIRECTOR

02/04/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name DE LEON DE CABALLERO, MARIANA  
Address 6901 NORTHWEST 111 AVENUE  
City-State-Zip: DORAL FL 33178

Title DIRECTOR  
Name DESCALZI, GUILLERMO  
Address 2010 N.W. 7TH STREET  
City-State-Zip: MIAMI FL 33125

Title DIRECTOR  
Name ABELLA, IRMA  
Address 2100 COUNTRY CLUB PRADO  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name CABALLERO, CARLOS  
Address 6901 NORTHWEST 111 AVENUE  
City-State-Zip: DORAL FL 33178

Title DIRECTOR  
Name ABELLA, TONY  
Address 2100 COUNTRY CLUB PRADO  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR  
Name GALLIANO, CHRISTINE  
Address 8100 SOUTHWEST 83RD STREET  
City-State-Zip: MIAMI FL 33143