## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N21000012585

Entity Name: IMAGO POR LAS ARTES, INC.

## **Current Principal Place of Business:**

4028 SW 57TH AVE MIAMI, FL 33155

## **Current Mailing Address:**

4028 SW 57TH AVE SOUTH MIAMI, FL 33155 US

## FEI Number: 87-3662215

### Name and Address of Current Registered Agent:

MARTINEZ, GUILLERMO MR. 50 MINORCA AVENUE APT. 1204 CORAL GABLES, FL 33134 US

Certificate of Status Desired: No

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                 | E: GUILLERMO MARTINEZ                    |                 |                           | 02/16/2024 |
|---------------------------|--|-----------------|---------------------------|------------|
|                           | Electronic Signature of Registered Agent |                 |                           | Date       |
| Officer/Director Detail : |  |                 |                           |            |
| Title                     | PRESIDENT                                | Title           | VP                        |            |
| Name                      | PRADO, MARIA ALEJANDRA                   | Name            | OROPEZA, TRINA E          |            |
| Address                   | 4670 NW 84TH AVE APT 21                  | Address         | 50 MINORCA AVE APT 1204   |            |
| City-State-Zip:           | DORAL FL 33166                           | City-State-Zip: | CORAL GABLES FL 33134     |            |
| Title                     | TREASURER                                | Title           | SECRETARY                 |            |
| Name                      | MARTI-NEZ, GUILLERMO                     | Name            | CHACON, KATHERINE A       |            |
| Address                   | 50 MINORCA AVE APT 1204                  | Address         | 222 NE 25TH ST<br>APT 909 |            |
| City-State-Zip:           | CORAL GABLES FL 33134                    | City-State-Zip: | MIAMI FL 33137            |            |
| Title                     | DIRECTOR                                 | Title           | DIRECTOR                  |            |
| Name                      | IRIBARREN, XIMENA                        | Name            | COTTE-CRUZ, ROZABELLE     |            |
| Address                   | 10702 NW 77TH ST                         | Address         | 9724 SW 148TH CT          |            |
| City-State-Zip:           | DORAL FL 33178                           | City-State-Zip: | MIAMI FL 33196            |            |
| Title                     | DIRECTOR                                 | Title           | DIRECTOR                  |            |
| Name                      | SOLORZANO, ANGELICA                      | Name            | MATEO SOSA, CECILIA       |            |
| Address                   | 1331 BRICKELL BAY DRIVE<br>APT 701       | Address         | 11 SAMANA DRIVE           |            |
| City-State-Zip:           | MIAMI FL 33131                           | City-State-Zip: | MIAMI FL 33133            |            |

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: MARIA ALEJANDRA PRADO

PRESIDENT

02/16/2024

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Feb 16, 2024 Secretary of State 6569399040CC