

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P22000001112

**Entity Name:** GENMUSA CORP

**Current Principal Place of Business:**

5201 BLUE LAGOON DR  
SUITE 813  
MIAMI, FL 33126

**Current Mailing Address:**

5201 BLUE LAGOON DR  
SUITE 813  
MIAMI, FL 33126 US

**FEI Number:** 87-4462784

**Certificate of Status Desired:** No

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

ARIAS CONSULTING & SERVICES CORP  
4708 NW 114TH AV UNIT 202  
DORAL, FL 33178 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

**Officer/Director Detail :**

Title	P
Name	ACOSTA, MARY C
Address	5201 BLUE LAGOON DR SUITE 813
City-State-Zip:	MIAMI FL 33126
Title	D
Name	GUTIERREZ, LUCIA M
Address	KM 21 CARRETERA PANAMERICANA, CC CASCADA
City-State-Zip:	CARRIZAL MIRANDA 31203

Title	VP
Name	MONASTERIOS, RUBEN D
Address	KM 21 CARRETERA PANAMERICANA, CC CASCADA
City-State-Zip:	CARRIZAL MIRANDA 31203
Title	D
Name	HERNANDEZ, FRANCISCO A
Address	KM 21 CARRETERA PANAMERICANA, CC CASCADA
City-State-Zip:	CARRIZAL MIRANDA 31203

*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:** ACOSTA , MARY C

P

04/27/2023

Electronic Signature of Signing Officer/Director Detail

Date