

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000152861

**Entity Name:** CORPORATE IMAGING SOLUTIONS LLC

**Current Principal Place of Business:**

2450 W 8TH LANE  
HIALEAH, FL 33010

**Current Mailing Address:**

2450 W 8TH LANE  
HIALEAH, FL 33010 US

**FEI Number:** 83-1705151

**Certificate of Status Desired:** No

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

SPIEGEL & UTRERA, P.A.  
2450 W 8TH LANE  
HIALEAH, FL 33010 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           MANAGER  
Name           MEIMAND, SAGHI  
Address        2450 W 8TH LANE  
City-State-Zip: HIALEAH FL 33010

Title           MANAGER  
Name           NUNEZ, HECTOR  
Address        2450 W 8TH LANE  
City-State-Zip: HIALEAH FL 33010

*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:** SAGHI MEIMAND

**MANAGER**

**04/09/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date