

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004842

Entity Name: IMA INSURANCE AGENCY, INC.

Current Principal Place of Business:

306 MAIN ST, THE DAY BUILDING
5TH FLOOR
WORCESTER, MA 01608

Current Mailing Address:

306 MAIN ST, THE DAY BUILDING
5TH FLOOR
WORCESTER, MA 01608

FEI Number: 04-2470972

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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 CEO
Name HERMAN-STROHECKER, LAURA BETH
Address 524 GREEN STREET
City-State-Zip: BOYLSTON MA 01505

Title DIRECTOR
Name HERMAN, JACOB ALEXANDER
Address 344 SOUTH 3RD ST, APT 2A
City-State-Zip: BROOKLYN NY 11211

Title VCPS
Name HERMAN, PETER HOWARD
Address 306 MAIN ST, THE DAY BUILDING
City-State-Zip: WORCESTER MA 01608

Title DIRECTOR
Name HERMAN, MAX HARRIS
Address 135 OAK CREST DR.
City-State-Zip: FRAMINGHAM MA 01701

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: LAURA BETH HERMAN-STROHECKER

CEO

01/11/2024

Electronic Signature of Signing Officer/Director Detail

Date