

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N18000001087

**Entity Name:** GRUPO FOLKLORICO MAHETZI CORP

**Current Principal Place of Business:**

1349 MARY LN RD  
CLEARWATER, FL 33755

**Current Mailing Address:**

1349 MARY LN RD  
CLEARWATER, FL 33755 US

**FEI Number: 82-4582014**

**Certificate of Status Desired: No**

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

PIOQUINTO SERRANO, HERMENEGILDO  
1349 MARY LN RD  
CLEARWATER, FL 33755 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 PIOQUINTO SERRANO, HERMENEGILDO  
Address 1349 MARY LN RD  
City-State-Zip: CLEARWATER FL 33755

Title S  
Name BARRIOS, VIANEY  
Address 6006 N TAMPA ST  
City-State-Zip: TAMPA FL 33604

Title TREASURER  
Name CERRITO BOMAYE, EUSEBIO  
Address 1709 LINWOOD CIRCLE  
City-State-Zip: CLEARWATER FL 33755

Title OFFICER  
Name ORTEGA HERNANDEZ, KARLA VANESSA  
Address 1172 HOWARD ST B  
City-State-Zip: CLEARWATER FL 33756

Title OFFICER  
Name FRANCISCO CERRITO, ROCIO  
Address 530 S LAKE DR  
City-State-Zip: CLEARWATER FL 33756

Title OFFICER  
Name CRUZ, MARIA RUBY  
Address 34964 REYNOLDS STREET  
City-State-Zip: DADE CITY FL 33523

Title OFFICER  
Name FACIO OROZCO , ALEJANDRA  
Address 8354 LAZY RIVER DR  
City-State-Zip: TAMPA FL 33617

*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: PIOQUINTO SERRANO HERMENEGILDO**

**PRESIDENT**

**04/30/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date