

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G17043

**Entity Name:** PAUSYL CORPORATION

**Current Principal Place of Business:**

2780 NE 183 STREET  
#614  
AVENTURA, FL 33160

**Current Mailing Address:**

P.O. BOX 111201  
NAPLES, FL 34108 US

**FEI Number:** 59-2264174

**Certificate of Status Desired:** No

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

LEFKOW, HOLLY  
2780 NE 183 STREET  
#614  
AVENTURA, FL 33160 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 PD  
Name LEFKOW, SETH  
Address 2780 NE 183 STREET  
#614  
City-State-Zip: AVENTURA FL 33160

Title VD  
Name LEFKOW, HOLLY  
Address 2780 NE 183 STREET  
#614  
City-State-Zip: AVENTURA FL 33160

Title ST  
Name LEFKOW, BROOKE  
Address 2780 NE 183 STREET  
#614  
City-State-Zip: AVENTURA FL 33160

*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:** HOLLY LEFKOW

VD

04/22/2019

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

\_\_\_\_\_  
Date