

**2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G86889

**Entity Name:** REVELL INVESTMENTS INTERNATIONAL, INC.**Current Principal Place of Business:**201 ALHAMBRA CIRCLE, SUITE 900  
CORAL GABLES, FL 33134**Current Mailing Address:**201 ALHAMBRA CIRCLE, SUITE 900  
CORAL GABLES, FL 33134 US**FEI Number:** 59-2375666**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REVELL, WALTER LC / CEO  
201 ALHAMBRA CIRCLE, SUITE 900  
CORAL GABLES, FL 33134 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	CD
Name	REVELL, WALTER LCD/CEO
Address	201 ALHAMBRA CIRCLE, SUITE 900
City-State-Zip:	CORAL GABLES FL 33134

Title	PDS
Name	REVELL, SHEILA WPDS
Address	201 ALHAMBRA CIRCLE, SUITE 900
City-State-Zip:	CORAL GABLES FL 33134

Title	VD
Name	REVELL, KEITH DVD
Address	201 ALHAMBRA CIRCLE, SUITE 900
City-State-Zip:	CORAL GABLES FL 33134

Title	VDT
Name	ELMSLIE, DINA CVDT
Address	201 ALHAMBRA CIRCLE, SUITE 900
City-State-Zip:	CORAL GABLES FL 33134

Title	VD
Name	REVELL, ELLIOT NVD
Address	201 ALHAMBRA CIRCLE, SUITE 900
City-State-Zip:	CORAL GABLES FL 33134

*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: WALTER L. REVELL****CHAIRMAN/CEO****01/28/2018**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date