

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000062679

**Entity Name:** TIVOLI-CRIS1 INC.

**Current Principal Place of Business:**

1000 BRICKELL AVENUE  
SUITE # 400  
MIAMI, FL 33131

**Current Mailing Address:**

1000 BRICKELL AVENUE  
SUITE # 400  
MIAMI, FL 33131 US

**FEI Number:** 27-4033540

**Certificate of Status Desired:** No

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

CORPORATE MAINTENANCE SERVICES  
1000 BRICKELL AVENUE  
SUITE # 400  
MIAMI, FL 33131 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:** NICOLAS STANHAM

03/02/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name MAILHOS, MARIA CRISTINA  
Address 2665 S. BAYSHORE DRIVE, SUITE 703  
City-State-Zip: MIAMI FL 33133

Title TD  
Name MORIXE MAILHOS, FEDERICO  
Address 2665 S. BAYSHORE DRIVE, SUITE 703  
City-State-Zip: MIAMI FL 33133

Title VPD  
Name MORIXE MAILHOS, IGNACIO  
Address 2665 S. BAYSHORE DRIVE, SUITE 703  
City-State-Zip: MIAMI FL 33133

Title SD  
Name MORIXE MAILHOS, JOAQUIN  
Address 2665 S. BAYSHORE DRIVE, SUITE 703  
City-State-Zip: MIAMI FL 33133

*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:** MAILHOS , MARIA CRISTINA

PD

03/02/2016

Electronic Signature of Signing Officer/Director Detail

Date