

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# V48084

**Entity Name:** PAVILLION FOODS, INC.

**Current Principal Place of Business:**

4627 PANORAMA AVE  
HOLIDAY, FL 34690

**Current Mailing Address:**

4627 PANORAMA AVE  
HOLIDAY, FL 34690 US

**FEI Number:** 59-3130762

**Certificate of Status Desired:** No

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

COMELLA, MARY E  
4627 PANORAMA AVE  
HOLIDAY, FL 34690 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	Title	S
Name	COMELLA, MARY E	Name	COMELLA, MARY E
Address	4627 PANORAMA AVE	Address	4627 PANORAMA AVE
City-State-Zip:	HOLIDAY FL 34690	City-State-Zip:	HOLIDAY FL 34690

*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:** MARY E COMELLA

**PRES**

**03/21/2014**

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

\_\_\_\_\_  
Date