

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003476

Entity Name: PAVILO CR, INC.**Current Principal Place of Business:**1468 BEAR CREEK ROAD
LEICESTER, NC 28748**Current Mailing Address:**901 PONCE DE LEON BLVD.
SUITE 402
CORAL GABLES, FL 33134 US**FEI Number:** 73-1635516**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TORRES, JOSE M
901 PONCE DE LEON BLVD.
SUITE 402
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:** JOSE M TORRES

02/07/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D, VP
Name SMITH, JOSE I. III
Address 901 PONCE DE LEON BLVD.
SUITE 402
City-State-Zip: CORAL GABLES FL 33134

Title D, P, T
Name COSTA, JOSE A. III
Address 901 PONCE DE LEON BLVD.
SUITE 402
City-State-Zip: CORAL GABLES FL 33134

Title D, VP, S
Name SMITH, MARIA COSTA
Address 901 PONCE DE LEON BLVD.
SUITE 402
City-State-Zip: CORAL GABLES FL 33134

Title D, VP
Name SUAREZ, MARGARITA COSTA
Address 901 PONCE DE LEON BLVD.
SUITE 402
City-State-Zip: CORAL GABLES FL 33134

Title D, VP
Name COSTA, EDUARDO C
Address 901 PONCE DE LEON BLVD.
SUITE 402
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: JOSE A. COSTA, III

PRESIDENT

02/07/2018

Electronic Signature of Signing Officer/Director Detail

Date