

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000017019

**Entity Name:** SVO INTERNATIONAL, INC.**Current Principal Place of Business:**9002 SAN MARCO COURT  
ORLANDO, FL 32819**Current Mailing Address:**9002 SAN MARCO COURT  
ORLANDO, FL 32819 US**FEI Number:** 59-3377392**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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            PRESIDENT, CEO  
Name            RIVERA, SERGIO D  
Address        9002 SAN MARCO COURT  
City-State-Zip: ORLANDO FL 32819

Title            DIRECTOR, SVP  
Name            THOMAS, THORP S  
Address        9002 SAN MARCO COURT  
City-State-Zip: ORLANDO FL 32819

Title            VP, SECRETARY  
Name            HALLADAY, ANGELA K  
Address        9002 SAN MARCO COURT  
City-State-Zip: ORLANDO FL 32819

Title            VP, ASST. SECRETARY  
Name            SUAREZ, ROBIN L  
Address        9002 SAN MARCO COURT  
City-State-Zip: ORLANDO FL 32819

Title            ASST. TREASURER  
Name            BUCKWALTER, JOHN  
Address        15147 N. SCOTTSDALE RD., STE H-210  
City-State-Zip: SCOTTSDALE AZ 85254

Title            DIRECTOR, VP, ASST. SECRETARY  
Name            OVERTON, BARBARA  
Address        9002 SAN MARCO COURT  
City-State-Zip: ORLANDO FL 32819

Title            DIRECTOR, SVP, COO  
Name            WILLIAMS, STEPHEN G  
Address        9002 SAN MARCO COURT  
City-State-Zip: ORLANDO FL 32819

Title            VP, TREASURER  
Name            CASSIN, LISA  
Address        9002 SAN MARCO COURT  
City-State-Zip: ORLANDO FL 32819

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*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: JOHN BUCKWALTER****ASST TREASURER****03/16/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title ASST. SECRETARY  
Name COHEN, JASON F  
Address ONE STARPOINT  
City-State-Zip: STAMFORD CT 06902

Title VP  
Name MCGILL, HEATHER  
Address 9002 SAN MARCO COURT  
City-State-Zip: ORLANDO FL 32819