

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 827186

Entity Name: CDR MAGUIRE INC.

**Current Principal Place of Business:**

16267 SW 157 AVENUE  
MIAMI, FL 33187

**FILED**  
**Jan 13, 2020**  
**Secretary of State**  
**6929155052CC**

**Current Mailing Address:**

PO BOX 771750  
MIAMI, FL 33177 US

FEI Number: 05-0318211

Certificate of Status Desired: No

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

DUART, CARLOS A  
16267 SW 157 AVENUE  
MIAMI, FL 33187 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 PTD  
Name DUART, CARLOS A  
Address PO BOX 771750  
City-State-Zip: MIAMI FL 33177

Title S  
Name KERR, KATRINA  
Address PO BOX 771750  
City-State-Zip: MIAMI FL 33177

Title VP  
Name AMORELLO, MATTHEW  
Address 2 GRANITE AVENUE  
SUITE 150  
City-State-Zip: MILTON MA 02186

Title COO, DIRECTOR  
Name MACEY, MATTHEW  
Address 503 MARTINDALE STREET  
6TH FLOOR  
City-State-Zip: PITTSBURGH PA 15212

Title EXECUTIVE VP  
Name VIDAL-DUART, TINA  
Address PO BOX 771750  
City-State-Zip: MIAMI FL 33177

Title CEO, DIRECTOR  
Name DUART, CARLOS E  
Address PO BOX 771750  
City-State-Zip: MIAMI FL 33177

Title VP  
Name SHADLE, STEPHEN  
Address 503 MARTINDALE STREET  
6TH FLOOR  
City-State-Zip: PITTSBURGH PA 15212

Title VP  
Name SASSO, JOSEPH  
Address 503 MARTINDALE STREET  
610  
City-State-Zip: PITTSBURGH PA 15212

**Continues on page 2**

*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: CARLOS A. DUART

PRESIDENT

01/13/2020

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name EVANKO, JOSEPH  
Address 503 MARTINDALE STREET  
SUITE 610  
City-State-Zip: PITTSBURGH FL 15212

Title VP  
Name GEARY, JONATHAN  
Address 2080 SILAS DEANE HIGHWAY  
City-State-Zip: ROCKY HILL CT 06067-2334