

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000078023

**Entity Name:** SERYGMA, LLC

**Current Principal Place of Business:**

591 E. SAMPLE ROAD, BOX 193  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

591 E. SAMPLE ROAD, BOX 193  
POMPANO BEACH, FL 33064 US

**FEI Number:** 98-0544474

**Certificate of Status Desired:** No

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

POLYANA APARECIDA DE OLIVEIRA  
591 E. SAMPLE ROAD, BOX 193  
POMPANO BEACH, FL 33064 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

**Authorized Person(s) Detail :**

Title MGRM  
Name SERYGMA AMBIENTAL  
Address RUA CIRINEU MENEZES N\* 10  
City-State-Zip: VIGILATO PEREIRA-UBERLANDIA MG  
38408-458

Title MGRM  
Name POLYANA APARECIDA DE OLIVEIRA  
Address 591 E. SAMPLE ROAD, BOX 193  
City-State-Zip: POMPANO BEACH FL 33064

Title MGRM  
Name CELI DE OLIVEIRA  
Address 591 E. SAMPLE ROAD, BOX 193  
City-State-Zip: POMPANO BEACH FL 33064

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** POLYANA DE OLIVEIRA

MGRM

02/05/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date