

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000098884

**Entity Name:** AKUARIUS AI, LLC**Current Principal Place of Business:**8180 NW 36 ST. # 308  
DORAL, FL 33166**Current Mailing Address:**8180 NW 36 ST. # 308  
DORAL, FL 33166 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ISURIETA, VIVIANA  
8180 NW 36 ST. # 308  
DORAL, FL 33166 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	MGR
Name	PIROGOVSKY, ERNESTO B
Address	8180 NW 36 ST # 308
City-State-Zip:	DORAL FL 33166

Title	PRESIDENT
Name	CASTELLANI, DANIEL JORGE
Address	8180 NW 36 ST # 308
City-State-Zip:	DORAL FL 33166

Title	SECRETARY
Name	POZZO, MARIA SILVINA
Address	8180 NW 36 ST # 308
City-State-Zip:	DORAL FL 33166

Title	DIRECTOR
Name	CASTELLANI POZZO, ARIANA
Address	8180 NW 36 ST # 308
City-State-Zip:	DORAL FL 33166

Title	DIRECTOR
Name	CASTELLANI, IVAN
Address	8180 NW 36 ST # 308
City-State-Zip:	DORAL FL 33166

*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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ERNESTO PIROGOVSKY

MANAGER

01/15/2021

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