

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000211395

**Entity Name:** YATAKA CONSULTING & TRADE LLC**Current Principal Place of Business:**65 PRODROMOS STR  
NIKAIA BUILDING/OFFICE 402  
STROVOLOS, NICOSIA 2063**Current Mailing Address:**65 PRODROMOS STR  
NIKAIA BUILDING/OFFICE 402  
STROVOLOS, NICOSIA 2063 CY**FEI Number:** 83-2063020**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NRAI SERVICES, INC.  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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 HADJIAVRAAM, STYLIANOS MR  
Address 65 PRODROMOS STR  
NIKAIA BUILDING/OFFICE 402  
City-State-Zip: STROVOLOS NICOSIA 2063

Title MGR  
Name TELLAKIS, APOSTOLOS MR  
Address 118 WIDDENHAM RD  
City-State-Zip: LONDON N7 9SQ

Title AUTHORIZED MEMBER  
Name TELLAKIS, IOANNIS MR.  
Address NEMESEOS 21  
City-State-Zip: MAROUSI ATHENS 15124

Title AUTHORIZED MEMBER  
Name KYRILI, TATIANI MRS.  
Address NEMESEOS 21  
City-State-Zip: MAROUSI ATHENS 15124

Title MGR  
Name TELLAKIS, IOANNIS MR  
Address NEMESEOS 21  
City-State-Zip: MAROUSI ATHENS 15124

Title AUTHORIZED MEMBER  
Name HADJIAVRAAM, STYLIANOS MR.  
Address AT 65 PRODROMOS STR  
NIKAIA BUILDING/OFFICE 402  
City-State-Zip: STROVOLOS NICOSIA 2063

Title AUTHORIZED MEMBER  
Name TELLAKIS, APOSTOLOS MR.  
Address 118 WIDDENHAM ROAD  
City-State-Zip: LONDON N7 9SQ

Title AUTHORIZED MEMBER  
Name PAPADOPOULOS, SOTIRIOS MR.  
Address NIKOU DIMITRIOU 25A  
City-State-Zip: LARNAKA 6031

**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 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:** STYLIANOS HADJIAVRAAM

MGR

01/28/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title	MGR
Name	PAPADOPOULOS, SOTIRIOS MR.
Address	NIKOU DIMITRIOU 25A
City-State-Zip:	LARNAKA 6031