

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000005426

**Entity Name:** SGARRO CONSULTING LLC

**Current Principal Place of Business:**

4215 SHERIDAN AVE.  
1  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

4215 SHERIDAN AVE.  
1  
MIAMI BEACH, FL 33140 US

**FEI Number:** 83-3087414

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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	Title	AMBR
Name	SGARRO, GREGORY	Name	SGARRO, GREGORY
Address	4215 SHERIDAN AVE. #1	Address	4215 SHERIDAN AVE. #1
City-State-Zip:	MIAMI BEACH FL 33140	City-State-Zip:	MIAMI BEACH FL 33140

*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:** SGARRO, GREGORY

**MANAGER / OWNER**

**01/23/2024**

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

\_\_\_\_\_  
Date