

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000030071

**Entity Name:** PHANTOM INTEGRADES SYSTEMS LLC

**Current Principal Place of Business:**

150 S.PINE ISLAND RD.  
SUITE 330  
PLANTATION, FL 33324

**Current Mailing Address:**

150 S.PINE ISLAND RD.  
SUITE 330  
PLANTATION, FL 33324 US

**FEI Number:** 83-3571513

**Certificate of Status Desired:** No

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

VA, MIGUEL  
150 S.PINE ISLAND RD.  
SUITE 330  
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 SEISDEDOS, CARLOS M  
Address 150 S.PINE ISLAND RD.  
SUITE 330  
City-State-Zip: PLANTATION FL 33324

*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:** CARLOS SEISDEDOS

MGR

02/01/2021

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

\_\_\_\_\_  
Date