

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000090208

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** TRIBECA CONSULTING GROUP, LLC

**Current Principal Place of Business:**

10275 COLLINS AV.  
# 424  
BAL HARBOUR, FL 33154

**New Principal Place of Business:**

**Current Mailing Address:**

10275 COLLINS AV  
# 424  
BAL HARBOUR, FL 33154

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

FELDMAN, GERARDO A  
10275 COLLIONS AV  
# 424  
BAL HARBOUR, FL 33154 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ARTURO, FELDMAN G  
Address: 10275 COLLINS AV #424  
City-St-Zip: BAL HARBOUR, FL 33154

I hereby certify that the information indicated on this 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.

SIGNATURE: GERARDO FELDMAN MGR 02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date