

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000113683

**Entity Name:** PITROM CONSULTING LLC

**Current Principal Place of Business:**

589 E SAMPLE RD  
SUITE 184  
POMPANO BEACH, FL 33064

**Current Mailing Address:**

589 E SAMPLE RD  
SUITE 184  
POMPANO BEACH, FL 33064 US

**FEI Number:** 46-0917787

**Certificate of Status Desired:** No

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

DE MIRANDA, JORGE L  
589 E SAMPLE RD  
SUITE 184  
POMPANO BEACH, FL 33064 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 DE MIRANDA, JORGE L  
Address 589 E SAMPLE RD SUITE 184  
City-State-Zip: POMPAN BEACH FL 33064

Title MGRM  
Name ARTIAGA DE MIRANDA, PATRICIA T  
Address 589 E SAMPLE RD SUITE 184  
City-State-Zip: POMPAN BEACH FL 33064

Title DIRECTOR  
Name ARTIAGA DE MIRANDA, MAYRA T  
Address 589 E SAMPLE RD  
SUITE 184  
City-State-Zip: POMPAN BEACH FL 33064

Title DIRECTOR  
Name ARTIAGA M SEFERIAN, ERYKA T  
Address 589 E SAMPLE RD  
SUITE 184  
City-State-Zip: POMPAN BEACH FL 33064

Title DIRECTOR  
Name ARTIAGA AFFONSO DE MIRANDA,  
ALEXANDRE  
Address 589 E SAMPLE RD  
SUITE 184  
City-State-Zip: POMPAN BEACH FL 33064

*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:** DE MIRANDA , JORGE L

MGR

04/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date