

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000159953

**Entity Name:** PIERRE TAX GROUP, LLC

**Current Principal Place of Business:**

15800 PINES BLVD  
SUITE 304  
PEMBROKE PINES, FL 33027

**Current Mailing Address:**

15800 PINES BLVD  
SUITE 304  
PEMBROKE PINES, FL 33027 US

**FEI Number:** 47-5115584

**Certificate of Status Desired:** No

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

PHILANTROPE, PIERRE G  
15800 PINES BLVD  
SUITE 304  
PEMBROKE PINES, FL 33027 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           MANAGING DIRECTOR  
Name           PHILANTROPE, PIERRE G  
Address        15800 PINES BLVD  
                  SUITE 304  
City-State-Zip:   PEMBROKE PINES FL 33027

*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:** PIERRE PHILANTROPE

**MANAGING DIRECTOR**

**04/04/2025**

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

\_\_\_\_\_  
Date