## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000171436

**Entity Name: TERRIFYKUS LLC** 

**Current Principal Place of Business:** 

8643 SW 137 AVE MIAMI, FL 33183

**Current Mailing Address:** 

5660 ELM AVE

LONG BEACH . CA 90805 US

FEI Number: 83-1308605 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

US TAX CONSULTING INC 5401 S KIRKMAN RD STE 135 ORLANDO, FL 32819 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

**FILED** Feb 28, 2025

**Secretary of State** 

1020886095CC

Authorized Person(s) Detail:

Title **AMBR** Title

MEIXEDO CARDOSO, ANTONIO BUENO CARDOSO, PEDRO AUGUSTO Name Name

**SERGIO** 

AMBR

320 EAST 42ND STREET APT 1608 Address **RUA PETUNIA 77** Address

City-State-Zip: JANDIRA SP 06642--070 City-State-Zip: NEW YORK NY 10017

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.