

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000066221

**Entity Name:** 1651 ASTOR LLC

**Current Principal Place of Business:**

VIA INDUSTRIA 31  
6934 BIOGGIO,

**Current Mailing Address:**

C/O BRIAN L BAKER CPA, P.A.  
1900 GLADES ROAD SUITE 356  
BOCA RATON, FL 33431 US

**FEI Number:** 65-0350574

**Certificate of Status Desired:** No

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

LAPIDES, BARRY D  
C/O BERGER SINGERMANN LLP  
1450 BRICKELL AVE STE 1900  
MIAMI, FL 33131 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 1651 NORTH COLLINS CORP.  
Address VIA INDUSTRIA 31  
City-State-Zip: 6934 BIOGGIO

Title ASST. TREASURER  
Name BAKER, BRIAN L.  
Address C/O BRIAN L BAKER CPA, P.A.  
1900 GLADES ROAD SUITE 356  
City-State-Zip: BOCA RATON FL 33431

*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:** BRIAN L. BAKER

AT

04/22/2019

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

\_\_\_\_\_  
Date