

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000281434

**Entity Name:** PINAR 19, LLC

**Current Principal Place of Business:**

1901 W FLAGLER ST  
SUITE 1  
MIAMI, FL 33135

**Current Mailing Address:**

1901 W FLAGLER ST  
SUITE 1  
MIAMI, FL 33135 US

**FEI Number:** 83-2988334

**Certificate of Status Desired:** No

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

GONZALEZ, RAUL JR.  
1901 W FLAGLER ST  
SUITE 1  
MIAMI, FL 33135 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:** RAUL GONZALEZ JR

03/21/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MANAGER  
Name GONZALEZ, RAUL  
Address 1901 W FLAGLER ST SUITE 1  
City-State-Zip: MIAMI FL 33135

Title MANAGER  
Name GONZALEZ, DANIEL  
Address 1901 W FLAGLER ST SUITE 1  
City-State-Zip: MIAMI FL 33135

Title MANAGER  
Name GONZALEZ-WRIGHT, ESTHER  
Address 1901 W FLAGLER ST SUITE 1  
City-State-Zip: MIAMI FL 33135

Title MANAGER  
Name GONZALEZ, LIANA E  
Address 1901 WEST FLAGLER STREET  
SUITE 1  
City-State-Zip: MIAMI FL 33135

Title MANAGER  
Name GONZALEZ, DANI O  
Address 1901 W FLAGLER ST  
SUITE 1  
City-State-Zip: MIAMI FL 33135

Title MANAGER  
Name GONZALEZ, DANIEL JR.  
Address 1901 W FLAGLER ST  
SUITE 1  
City-State-Zip: MIAMI FL 33135

Title MANAGER  
Name GONZALEZ, ERIK J  
Address 1901 W FLAGLER ST  
SUITE 1  
City-State-Zip: MIAMI FL 33135

*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:** RAUL GONZALEZ

MANAGER

03/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date