

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000006649

**Entity Name:** 55 WEST 19TH STREET CO., LLC,

**Current Principal Place of Business:**

401 EAST LAS OLAS BOULEVARD  
SUITE 130-517  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

401 EAST LAS OLAS BOULEVARD  
SUITE 130-517  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
5850 CORAL RIDGE DRIVE, SUITE 201  
PLANTATION, FL 33324 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 MGRM  
Name FREMER, ANDREW J JR  
Address 401 EAST LAS OLAS BOULEVARD,  
STE 130-517  
City-State-Zip: FORT LAUDERDALE FL 33301

*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: ANDREW FREMER**

**MGR**

**03/25/2019**

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

\_\_\_\_\_  
Date