


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 - 2000		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED

00 OCT -9 PM 1:13

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILING FEE \$ 188.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company DOCUMENT # L98000001439 SOVEREIGN INTERNATIONAL ASSET MANAGEMENT, LLC 2706 ALT 19, Suite 114 Palm Harbor, FL 34683	1a. Principal Place of Business Address 2706 ALT 19, Suite 114 Palm Harbor, FL 34683
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2. Principal Place of Business 2706 ALT 19 Suite, Apt. #, etc. Suite 114 City & State Palm Harbor Zip FL	2a. Mailing Address 2706 ALT 19 Suite, Apt. #, etc. Suite 114 City & State Palm Harbor Zip FL	3. Date Organized or Qualified 08/13/1998	3a. State of Formation FL
		4. FEI Number 59-3529547	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		5. Date of Last Report	6. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent CORPORATION SERVICE , COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301
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8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) DATE _____

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	GROSSMAN, LARRY C	2706 ALT 19, Suite 114	Palm Harbor, FL 34683

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 *****100.00 *****100.00

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: Larry C Grossman 9-12-00 727 784-4841
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #



October 4, 2000
Nanette Causseaux
Corporate Specialist Supervisor
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

Ref. Number: L98000001439

This is to advise you that the first notice of renewal was not received by Sovereign International Asset Management, LLC. It seems likely that the notice went to our old address in Tampa.

I am returning the paper work and check to you. I appreciate your help in resolving this

Cordially,

A handwritten signature in black ink, appearing to read "L.C.G.", with a long horizontal flourish extending to the right.

Larry C. Grossman
Managing Director
LCG:vlg
Enc.

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TALLAHASSEE, FLORIDA