

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **G62107**

1. Entity Name
SARTO REALTY, INC

pg 1 of 2
07-12-2000 90004 031 ***150.00
G62107

FILED

00 AUG 10 AM 9: 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1121-8th Street
Miami Beach, FL 33139

Mailing Address

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Zip

4. FEI Number
59-2337835

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SOTO, ARSENI0 R
1121-8th STREET
MIAMI BEACH, FL 33139

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. 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 _____ (NOTE: Registered Agent Signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution: ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

| | | |
|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D P SOTO, ARSENI0 R 1121-8th STREET MIAMI BEACH, FL 33139 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Arsenio R Soto** **ARSENI0 R SOTO** **6/20/00** **305-672-9558**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

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Sarto Realty Inc.

1121 8th Street
Miami Beach, FL 33139
(305) 672-4556

August 1, 2000

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Reference: Letter dated July 18th 2000

Subject: Sarto Realty, Inc.

Per my conversation with your office today at telephone # 850-487-6259 option #2, I was advised to write this letter and send photocopies of past correspondence.

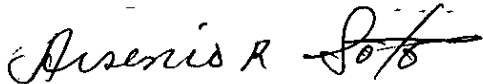
As we did not receive our pre-printed form this year, I made a copy of a form but inadvertently did not realize it was the incorrect form, that of a limited liability company. That form was sent to your office with payment on April 20th 2000.

When that office of LLC send me a letter that I had filed out the form incorrectly and to please correct it, I realized I had sent the wrong form. I called your office and explained the error; also I requested the correct form to file.

I did so, and I have attached photocopies of my previous filings. I am hoping that the late fees will be waived as the original filling, even though incorrect, was done prior to the May 1st due date.

Thanking you in advance for all your assistance.

Sincerely,



Arsenio R. Soto
President