PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

COR	PORATIO	N
REINS	STATEME	NT,



FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P02000021720

1. Corporation Name

Sorrmac Trading. Inc.

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·			20 11/21	000249174; /0301015002	⊇:⊇ **158.75	
2. Principal Office Address 3033 RIVIETA Drive		Mailing Office Address		PENSTATENTAT		
Suite, Apt. #, etc. # 106	Suite, Apt. #, etc	с.	4. Date Incorp	4. Date Incorporated or Qualified 7 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
city & State Naples, FL	City & State					
34103 Collier	Zip	Country	6. CERTIFICATE		Additional Fee required a Certificate of Status	
	7. Nan	me and Address of Current F	Registered Agent			
Name Antonio F	-aga.	Esquire				
Street Address (P.O. Box Number is N 1955 Av	Port (Road N., 5-	te.101	 		
oute, Apr. 11, Etc.						
city naples				State Zip Code 34109	7	
	we named corporat	tion, am familiar with and acce	pt the obligations of section	on 607.0505 or 617.0503, F.S.		
Signature of Registered Agent	EØISTERED AGEN	NT MUST SIGN		Date 10 31 03		
9. Names and Street Addresses of Each Officer an	d/or Director (Florid	da nonprofit corporations must	list at least 3 directors)			
Titles Name of Officers and/or Directors	5	Street Address of Each Officer and/or Director		City / State / Zip		
D, P, VP, S Robert J. Sorr	rentino	3033 Riviera.		naples, FL 3	4103	
T David Schipper	rs F	3033 Riviera	Drive#106	naples, FL 3	4103	
•			-			
				,		

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert J. Sollantia 10/31/03 239-643-3051
Date Daytime Phone #

2062

SorrMac Trading, Inc. 3033 Riviera Drive, #106 Naples, FL 34103 239-643-3051

October 31, 2003

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

RE:

SorrMac Trading, Inc.

Document No. P02000021720

To Whom It May Concern:

Please be advised that we did not receive our 2003 Uniform Business Report. Please accept the enclosed check for \$158.75 to reinstate and issue a Certificate of Good Standing. Our correct mailing and principal office address is: 3033 Riviera Drive, #106, Naples, Florida 34103.

Thank you for your courtesies regarding to this matter.

Very truly yours,

SorrMac Trading, Inc.

By:<u>_/</u>

Robert J. Sorrentino, President

Encls.