SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Jul 20, 1999 8:00 am Secretary of State

07-20-1999 90002 017 ***150.00

DOCUMENT # S84987

SORTEVER LIMITED, INC.

Principal Place of Business Mailing Address						
			50 SOUTH OCEAN DRIVE			
MIAMI BEAUT I	FL 33139	MIAMI BEACH	MIAMI BEACH FL 33139			. DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						10/04/1991
2. Principal P	Place of Business	2a. Mailing	Address			4. FEI Number Applied For
21		⊢ ,	26			65-0246199 Not Applicable
Suite, Apt.	# etc		Suite, Apt. #, etc.			\$8.75 Additional
22	, n, 0.0.		27 -			5. Certificate of Status Desired Fee Required
City & Stat	te .		City & State			6. Election Campaign Financing \$5.00 May Be
23	.5	— — · ·	28			Trust Fund Contribution Added to Fees
Zip	Countr		Cou	intry		8. This corporation owes the current year
24	25	29	30			Intangible Personal Property. Yes No
[24] ·		ess of Current Registered Age		1		10. Name and Address of New Registered Agent
	VI Hama and Hadit	oo or our one regional		81	Name	
DAN	IELS, NICHOLAS M E	SQ.				
THERREL BAISDEN & MEYER WEISS			82 Stree		Street	t Address (P.O. Box Number is Not Acceptable)
1111 LINCOLN ROAD, SUITE 500				83	 	
	Al FL 33139	717 L 000		03	ĺ	
14073(1	M 1 L 00100			84	City	85 Zip Code
				L	L	FL W EF 5333
11. Pursuan	t to the provisions of sec	tions 607.0502 and 607.1508, F	lorida Statutes, the ab	ove-	named o	corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.						
SIGNATURE						
	Signature, typed or printed name	e of registered agent and title if applicable.	<u> </u>	ered A	gent signati	ture required when reinstating) DATE
12.		FFICERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	L	DELETE 1.1 Tr	TLE		Change Addition
NAME	BARRACCA, MASSI	MO	1.2 N/	AME		
STREET ADDRESS	850 South Ocean	I DRIVE	1.3 ST	REET	ADDRESS	
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CI	TY-ST	-ZIP	
TITLE	D		DELETE 2.1 TI	TLE		Change Addition
NAME	GODINA, FRANCO		2.2 NA	AME		
STREET ADDRESS	850 SOUTH OCEAN	I DRIVE	2.3 ST	REET	ADDRESS	
CITY-ST-ZIP	-MIAMI BEACH-FL	د ما پیشا داد.	2.4 CI	TY-ST	-ZiP	The second secon
TITLE			DELETE 3.1 TI	TLE		Change Addition
NAME		_	3.2 N/	AME		
STREET ADDRESS	}		3.3 ST	REET	ADDRESS	
CITY-ST-ZIP			3.4 Cf	TY-ST	-ZIP	
TITLE	1		DELETE 4.1 TI			Change Addition
NAME		_	4.2 NA	AME		
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE				TY-ST	-LIP	Change C Addition
		L	DELETE 5.1 TI			Change Addition
NAME						
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			5.4 CI		-ZIP	
TITLE		L	DELETE 6.1 TI			Change Addition
NAME	1		6.2 N/	AME		
OTOFFT + DDOTTS	1			-		1

14. I 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 or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

. (., '

6.4 CITY-ST-ZIP

7-6-91

(305) 132-0707

7

590811-90002-17 584987

FREISTAT & ASSOCIATES, P.A.

Certified Public Accountants

16211 N.E. 18th Avenue • North Miami Beach, Florida 33162 • (305) 945-4151 • Telecopier 945-1215

Warren Freistat, C.P.A.

July 7, 1999

Members:
American Institute of
Certified Public Accountants
Florida Institute of
Certified Public Accountants

Annual Report Filings
Division of Corporation
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re:

1999 Profit Corporation Annual Report for Sortever Limited, Inc.

65-0246199

Gentlemen:

We represent the above referenced corporation and they have requested we explain, what we consider to be reasonable cause, for the delinquent filing and remitting of the Annual Report, in an effort to have the penalty provision abated.

In the past the Company's bookkeeper had handled the responsibility of filing the Annual Report. Having been shorthanded, without the services of its bookkeeper, the Company's owners do not recall receiving the original Annual Report. The Company has always complied with the filing requirements and the occurrence of delinquency was unintentional.

We request you accept the enclosed check of \$150.00 as full payment and waive the penalty for this singular filing delinquency.

Thank you for your cooperation in this matter.

Very truly yours,

FREISTAT & ASSOCIATES, P.A.

Mark A. Liebman

Certified Public Accountant

ML:bf Enc.