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FILED

Apr 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L23195 (5)

1. Corporation Name

SENTINEL INSTRUMENT CORPORATION

Principal Place of Business

Mailing Address

1500 SE 3RD COURT
SUITE 109
DEERFIELD BEACH FL 33441
US

1500 SE 3RD COURT
SUITE 109
DEERFIELD BEACH FL 33441
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/16/1989

4. FEI Number

65-0150495

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

2. Principal Place of Business

21 1228 S. Military Trail

Suite, Apt. #, etc.

22 apt # 2125

City & State

23 Deerfield Beach, FL

Zip

24 33442

Country

25 USA

2a. Mailing Address

26 1228 S. Military Trail

Suite, Apt. #, etc.

27 Apt # 2125

City & State

28 Deerfield Beach FL

Zip

29 33442

Country

30 USA

9. Name and Address of Current Registered Agent

ARMUS, SHELDON R
1500 SE 3RD COURT SUITE 109
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

81 Name

ARMUS, SHELDON R

82 Street Address (P.O. Box Number is Not Acceptable)

1228 S. Military Trail apt 2125

83

84 City

Deerfield Beach

FL

85 Zip Code

33442

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named 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

Sheldon R. Armus

(NOTE: Registered Agent signature required when reinstating)

DATE

3/30/98

12. OFFICERS AND DIRECTORS

TITLE PCD ☐ DELETE

NAME ARMUS, SHELDON
STREET ADDRESS 601 CYPRESS LAKE BLVD APT N
CITY-ST-ZIP POMOPANO BEACH FL

TITLE D ☐ DELETE

NAME ARMUS, JENNIFER A.
STREET ADDRESS 818 W. THARPE STREET
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PCD ☒ Change ☐ Addition

1.2 NAME ARMUS, SHELDON
1.3 STREET ADDRESS 1228 S. Military Trail apt # 2125
1.4 CITY-ST-ZIP Deerfield Beach, FL 33442

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME WHITTAKER JENNIFER A.
2.3 STREET ADDRESS 2772 NE 29 AVE.
2.4 CITY-ST-ZIP LIGHTHOUSE PT., FL 33064

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Sheldon R. Armus

3/30/98

CR2E034 (10/97)