

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Jun 04 1998 8:00am
Secretary of State

DOCUMENT # 38550142 (7)
Corporation Name
SENTRA SECURITIES CORPORATION

Principal Place of Business
2355 NORTHSIDE DRIVE, SUITE #200
P.O. BOX 85023
SAN DIEGO CA 92108-4399

Mailing Address
2355 NORTHSIDE DRIVE, SUITE #200
P.O. BOX 85023
SAN DIEGO CA 92108-2707

3. Date Incorporated or Qualified
12/17/1982
3a. Date of Last Report
02/27/1997
4. FEI Number
95-3835749
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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24 Zip Country
25 Zip Country
26 Mailing Address
27 Suite, Apt. #, etc.
28 City & State
29 Zip Country
30 Zip Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	WOLTMAN, RICHARD P.	1.2 NAME	
STREET ADDRESS	2355 NORTHSIDE DR #200	1.3 STREET ADDRESS	
CITY-ST-ZIP	SAN DIEGO CA	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	
NAME	MCQUIRE, MELISA R.	2.2 NAME	
STREET ADDRESS	2355 NORTHSIDE DR #200	2.3 STREET ADDRESS	
CITY-ST-ZIP	SAN DIEGO CA	2.4 CITY-ST-ZIP	
TITLE	CFO	3.1 TITLE	
NAME	OLIVER, JACK	3.2 NAME	CFO Heising, Scott
STREET ADDRESS	2355 NORTHSIDE DR, #200	3.3 STREET ADDRESS	2355 Northside Dr Suite 200
CITY-ST-ZIP	SAN DIEGO CA	3.4 CITY-ST-ZIP	San Diego, CA 92108
TITLE	V	4.1 TITLE	
NAME	COEHLO, JOSEPH	4.2 NAME	
STREET ADDRESS	2355 NORTHSIDE DR #200	4.3 STREET ADDRESS	
CITY-ST-ZIP	SAN DIEGO CA	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	
NAME	WOLTMAN, KAYE A.	5.2 NAME	
STREET ADDRESS	2355 NORTHSIDE DR #200	5.3 STREET ADDRESS	
CITY-ST-ZIP	SAN DIEGO CA	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

300002552343
-06/09/98--01018--034
***150.00

14. 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 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 on an attachment with an address.

SIGNATURE: [Signature]

4-28-98

4-28-98

619-584-7000