PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **CORPORATION** 03 JUN -6 PM 12: 26 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS SECRETALY OF STATE TALLAHAGSEE, FLORIDA DOCUMENT # P01000020746 1. Corporation Name SENTRY FENCE, INC. 2. Principal Office Address 3. Mailing Office Address SAME 660 SILVER CREEK DRIVE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. Date Incorporated or Qualified 02/23/01 To Do Business in Florida City & State City & State 5. FEI Number Applied For WINTER SPRINGS, FL 59-371-3335 Not Applicable Country Zip Country \$8.75 Additional Fee required for a Certificate of Status 32708 CERTIFICATE OF STATUS DESIRED **SEMINOLE** 7. Name and Address of Current Registered Agent CATHERINE A BALLES CATHERINE A. BAILES Street Address (P.O. Box Number is Not Acceptable) 660 SIVLER CREEK DRIVE Suite, Apt. #, Etc. State Zip Code WINTER SPRINGS 32708 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Date 5-28-03 Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Titles City / State / Zip Officer and/or Director PD GUGLIELMELLO, KEITH L. 660 SILVER CREEK DRIVE WINTER SPRINGS, FL 32708 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 me legal effect as if made under oath. on this application is true and accurate, and

D NAME OF SIGNING OFFICER OR DIRECTOR

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To Whom it May Concern, Please accept our \$300.00 reinstatement fee for Sentry Fence, Inc. We had no idea the corporation was dissolved. (iccording to an employee in your office, our renewal form was returned to your office. Our accountant, Catherine a. Bailes of "Bradbeer & Bailes" had moved her bisiness to a new location and name. The representative we talked to paid that \$ 300 would be sufficient, Sincrely, Keith Duglielmella Sentry Flence, Inc.