2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2008 08:00 A Secretary of State **DOCUMENT # P02000107399** 1. Entity Name SENTINEL, INC. Mailing Address Principal Place of Business 3673 EXCHANGE AVE **3673 EXCHANGE AVE** STE. A STE. A NAPLES, FL 34104 US NAPLES, FL 34104 US 04062008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 11-3656295 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MARCZAK, MIKE DO NOT WRITE 3673 EXCHANGE AVE. STE A IN THIS SPACE NAPLES, FL 34104 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be U00000903482 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees "After May 1, 2008 Fee will be \$550.00 04/30/08-80048-003 150.00 OFFICERS AND DIRECTORS 10. TITLE NAME MARCZAK, MICHAEL A 3673 EXCHANGE AVE, STE, A STREET ADDRESS NAPLES, FL 34104 CiTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-Z!P IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP JITLE. NAME STREET ADDRESS

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with ail other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

MICHAEL V

MARCZAK, PRES.

Daylime Phone #