

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JUN 23 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000071640**

1. Corporation Name

Sentra Investments

2. Principal Office Address

3971 N.W. 188 St.

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 55-2014

Suite, Apt. #, etc.

City & State

Carol City, FL

City & State

Miami FL

Zip

33055 Miami-Dade

Zip

33055 Miami-Dade

Country

Miami-Dade

4. Date Incorporated or Qualified
To Do Business in Florida

Sept. 1994

5. FEI Number

650524404

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

George E Fitts

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

P.O. Box 55-2014 Carol City, FL 33055

Suite, Apt. #, Etc.

City

Miami FL 33055

State

FL

Zip Code

33055

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
Registered Agent

X [Signature]

REGISTERED AGENT MUST SIGN

Date

5-19-2003

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	George E Fitts	PO Box 55-2014 Miami FL 33055	3971 N.W. 188 St. Carol City, FL 33055

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 filing 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 on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

X [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5-19-2003

Division / Branch #

**SENTRA INVESTMENTS
P.O. BOX 55 – 2014
MIAMI FLORIDA 33055
305-620-6888**

May 15th, 2003

**Division of Corporation
Tallahassee, Florida**

To Whom It May Concern:

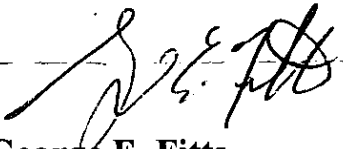
This letter is a request to re-instate my Florida Corp. ID # 65 – 0524404 for Sentra Investments. I am aware that I must complete and file my report on a yearly basis. I fail to file the report in the year of 2002 because I never receive the report.

I am requesting that you up-date my records to address all mail to

**Sentra Investments
C/o George E. Fitts
P. O. Box 55 – 2014
Miami, Florida 33055**

Please see check # 2845 in the amount of \$458.75 for re-instatement.

Thank You,


George E. Fitts