FILED Aug 10, 1999 8:00 am Secretary of State

08-10-1999 90019 015 ***550.00

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUN 1. Corporation	MENT # P95000	068355			
SENTINI	EL CAPITAL CORPORATION	1		3000000	
Principal Place	of Business	Mailing Address			#### #################################
28100 U.S. HW		28100 U.S. HWY. 19 N.			
SUITE 504	rt. 19 N.	SUITE 504		ì	
CLEARWATER	FL 33761	CLEARWATER FL 33761		DO NOT WRITE IN	N THIS SPACE
				3. Date Incorporated or Qualified	
				09/06/1995	
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3341255	Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		27			
City & State	9	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	Country		Country	8. This corporation owes the current y	
24 Zip	25	29	30	Intangible Personal Property.	Yes X No
	9. Name and Address of Current		30	10. Name and Address of New Regis	<u>-</u>
			81 Name		
	ROTA, JOSEPH J JR	•	82 Street Ad	Harris (D.O. Boy Number in Not Assentable)	
28100 US HIGHWAY 19 NORTH			52 Street Au	Street Address (P.O. Box Number is Not Acceptable)	
	TE 504		83		
	これのいれるすだけ ミレークタフタイ				
	ARWATER FL 33761		04 00		les Zip Code
CLE			84 City		FL 85 Zip Code
11. Pursuant office or nagent. I a		and 607.1508, Florida Statute of Florida. Such change was a titions of, section 607.0505, Fk	es, the above-named corpora	poration submits this statement for the purpos ation's board of directors. I hereby accept the	FL
11. Pursuant office or nagent. I a	to the provisions of sections 607.0502 registered agent, or both, in the State	tions of, section 607.0505, FR	es, the above-named corpora	required when reinstating)	se of changing its registered appointment as registered
11. Pursuant office or nagent. I a	to the provisions of sections 607.0502 registered agent, or both, in the State am familiar with, and accept the obliga Signature, typed or printed name of registered agent OFFICERS ANI	tions of, section 607.0000, FR	es, the above-named corpora authorized by the corpora orida Statutes. OTE: Registered Agent signature in		se of changing its registered appointment as registered
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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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

IFLOSOPHILLSOPOTO IN Assit Secr. 8/4/9

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