


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90166 037 ***150.00

DOCUMENT # P95000068355 1. Entity Name SENTINEL CAPITAL CORPORATION	
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Principal Place of Business 28100 U.S. HWY. 19 N. SUITE 504 CLEARWATER, FL 33761	Mailing Address 28100 U.S. HWY. 19 N. SUITE 504 CLEARWATER, FL 33761
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01072005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3341255	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**SOROTA, JOSEPH J JR
28100 US HIGHWAY 19 NORTH
SUITE 504
CLEARWATER, FL 33761**

DO NOT WRITE IN THIS SPACE

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATAS SOROTA, JOSEPH J JR 28100 U.S. HWY. 19 N., STE. 504 CLEARWATER, FL 33781
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTS LYNCH, AGNES 5108 BRITTANY DRIVE S., APT. 101 ST. PETERSBURG, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LYNCH, C.R. 5108 BRITTANY DRIVE S., APT. 101 ST. PETERSBURG, FL 33715
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 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 all other like empowered.

SIGNATURE: Joseph J. Sorota Jr. Ass't Sec Date: 4-25-05 Daytime Phone #: 727-796-1559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph J. Sorota Jr., Asst Sec