2000 UNIFORM BUSINESS REPORT (UBR)

FILED May 10, 2000 8:00 am Secretary of State **DOCUMENT # \$40371** 1. Entity Name SENTRY REALTY & PROPERTY MANAGEMENT. INC. 05-10-2000 90139 024 ***150.00 Principal Place of Business Mailing Address 14348 SW 98TH TER 13780 SW 56TH ST. MIAMI FL 33186-8818 MIAMI FL 33175 US US 2. Principal Place of Business 3. Mailing Address 13831 S.W. 59th Street DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 102 Applied For 4. FEI Number City & State City & State 65-0257450 Not Applicable Miami, Florida Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 33183 Dade 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BROUILLETTE, JOHN E. Street Address (P.O. Box Number is Not Acceptable) 14348 SW 98TH TERR. **MIAMI FL 33186** Zip Code City 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 SIGNATURE (NOTE: Registered Agent signature required when reinstating) printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition TITLE ☐ Delete TITLE BROUILLETTE, JOHN E. NAME NAME STREET ADDRESS 14348 SW 98TH TERR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition VST ☐ Delete TITLE TITLE BROUILLETTE, GABRIELA E. NAME NAME STREET ADDRESS 14348 SW 98TH TERR. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

MANUSCO E. Brouillette

04/20/2000

(305) 388-1304

Date

Daytime Phone #