

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 843030

**FILED
Jul 13, 2005
Secretary of State**

Entity Name: THE PROTECTIVE GROUP, INC.

Current Principal Place of Business:

14000 NW 58TH CT.
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

14040 NW 58TH CT.
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 02-0333472 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ESCALANTE, IRVING
9421 SW 32 STREET
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MILLER, MELVYN H
Address: 14000 NW 58TH CT.
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: S () Delete
Name: MILLER, CAROLYN
Address: 14000 NW 58 CT
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: T () Delete
Name: ESCALANTE, IRVING
Address: 14000 NW 58 CT
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAREAGA, EDUARDO
Address: 14000 NW 58TH CT.
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: S (X) Change () Addition
Name: BERNSTEIN, RICHARD
Address: 14000 NW 58 CT
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: LOSTAL, ROBERT P
Address: 14000 NW 58 CT
City-St-Zip: MIAMI LAKES, FL 33014 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IRVING ESCALANTE

T

07/13/2005

Electronic Signature of Signing Officer or Director

_____ Date