

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



OFFICE OF THE SECRETARY OF STATE
JANUARY 8, 1996
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -1 PM 4:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 843030 (8)

1. Corporation Name

THE PROTECTIVE GROUP, INC.

Principal Place of Business

14000 NW 58TH CT.
MIAMI LAKES FL 33014

Mailing Address

14000 NW 58TH CT.
MIAMI LAKES FL 33014

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 04/17/1979	3a. Date of Last Report 06/27/1994
4. FEI Number 02-0333472	Applied For Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	25. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country
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9. Name and Address of Current Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent required when registering)

(Signature of Registered Agent required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME	PD MILLER, MELVYN H. 14000 NW 58TH CT. MIAMI LAKES FL	1.1 TITLE	☐ Change ☐ Addition
2. NAME	S MILLER, RHEA 1500 S OCEAN DR PHD HOLLYWOOD FL	1.2 NAME	
3. NAME	H OFFMANN, MERCEDES 208 NAVAJO ST MIAMI SPRINGS FL	1.3 STREET ADDRESS	
4. NAME	AS BEATTY, PAUL C/O SULLIVAN & WORCESTER ONE POST OFFICE SQ. BOSTON MA	1.4 CITY - ST - ZIP	☐ Change ☐ Addition
5. NAME		2.1 TITLE	☐ Change ☐ Addition
6. NAME		2.2 NAME	
7. NAME		2.3 STREET ADDRESS	
8. NAME		2.4 CITY - ST - ZIP	☐ Change ☐ Addition
9. NAME		3.1 TITLE	☐ Change ☐ Addition
10. NAME		3.2 NAME	
11. NAME		3.3 STREET ADDRESS	
12. NAME		3.4 CITY - ST - ZIP	☐ Change ☐ Addition
13. NAME		4.1 TITLE	☐ Change ☐ Addition
14. NAME		4.2 NAME	
15. NAME		4.3 STREET ADDRESS	
16. NAME		4.4 CITY - ST - ZIP	☐ Change ☐ Addition
17. NAME		5.1 TITLE	☐ Change ☐ Addition
18. NAME		5.2 NAME	
19. NAME		5.3 STREET ADDRESS	
20. NAME		5.4 CITY - ST - ZIP	☐ Change ☐ Addition
21. NAME		6.1 TITLE	☐ Change ☐ Addition
22. NAME		6.2 NAME	
23. NAME		6.3 STREET ADDRESS	
24. NAME		6.4 CITY - ST - ZIP	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information submitted 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. I am an officer or director of the corporation or have been authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of a changed or new attachment with an address.

SIGNATURE:

(Signature and typed or printed name of signing officer or director)

2/22/95

(305) 556-2440