2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2006
Secretary of State

DOCUMENT# 843030

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

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

Title: S ( ) Delete
Name: BERNSTEIN, RICHARD
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: D ( ) Delete
Name: LOSTAL, ROBERT P
Address: 14000 NW 58 CT
City-St-Zip: MIAMI LAKES, FL 33014 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 01/06/2006

Electronic Signature of Signing Officer or Director — Date