

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P02000069496

1. Entity Name  
PROTECTING YOUR FUTURE, INC.



FILED

NOV -7 PM 3:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
7400 MIAMI LAKES DRIVE, #204  
MIAMI LAKES FL 33014

Mailing Address  
7400 MIAMI LAKES DRIVE, #204  
MIAMI LAKES FL 33014



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

36-45002-40-

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SENA, RICHARD  
7400 MIAMI LAKES DRIVE, #204  
MIAMI LAKES FL 33014

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

☐ \$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SENA, RICHARD  
7400 MIAMI LAKES DRIVE, #204  
MIAMI LAKES FL 33014 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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: \*

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8-4-03

CR2E034 (4/03)

2012

**JAIME MAYA**

CERTIFIED PUBLIC ACCOUNTANT

7705 N.W. 23 STREET

PEMBROKE PINES, FLORIDA 33024

Telephone: Miami (305) 401-8435 Broward (954) 981-4819 Fax: (954) 981-3128

E-Mail: OMYCPA@AOL.COM

11-05-2003

Division of Corporations  
Uniforms Business Reports Filing  
P.O. Box 1500  
Tallahassee, FL 32302-1500

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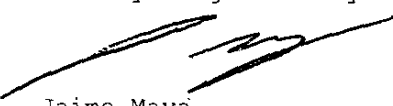
RE: Protecting Your Future, Inc.  
EIN: 36-4500240  
Document Number: P02000069496  
Uniform Business Report-Year 2003

Dear Sirs:

To follow up my telephone conversation with your office today regarding our request for your re-consideration in reversing the late and re-instatement fees, please note that the taxpayer's records do not indicate receiving the Uniform Business Report form prior to the May, 2003 filing deadline.

As was explained in our first two letters the taxpayer's late filing was inadvertent and we do not expect this to happen in future years.

Thank you again for your attention.

  
Jaime Maya  
Certified Public Accountant

enclosure  
xc-Protecting Your Future, Inc.

MEMBER:

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS  
FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS