

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000016434

FILED
Dec 07, 2009
Secretary of State

Entity Name: UNITED PROTECTION GROUP, INC.

Current Principal Place of Business:

4801 SOUTH UNIVERSITY DRIVE, STE 126
DAVIE, FL 33325

New Principal Place of Business:

Current Mailing Address:

4801 SOUTH UNIVERSITY DRIVE, STE 126
DAVIE, FL 33325

New Mailing Address:

FEI Number: 34-1976590

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANNELLY & COMPANY, P.A.
5440 NW 33RD AVENUE
SUITE 103
FT. LAUDERDALE, FL 33073 US

Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND STREET
4TH FLOOR
MIAMI, FL 33145 US

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: NATALIA UTRERA, VICE-PRESIDENT

12/07/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: LARKIN, LEO J
Address: 4801 SOUTH UNIVERSITY DRIVE, STE 126
City-St-Zip: DAVIE, FL 33325

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: LEO J. LARKIN

PSTD

12/07/2009

Electronic Signature of Signing Officer or Director

Date