

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000011695

FILED
Apr 09, 2005
Secretary of State

Entity Name: PROTECT-A-MED CORPORATION

Current Principal Place of Business:

5801 N.E. 14TH AVENUE
FT. LAUDERDALE, FL 3334 US

New Principal Place of Business:

Current Mailing Address:

5801 N.E. 14TH AVENUE
FT. LAUDERDALE, FL 3334 US

New Mailing Address:

FEI Number: 65-0395033 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORENTE, JOSEPH N.
5801 N.E. 14TH AVENUE
FT. LAUDERDALE, FL 3334 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: DOP () Delete
Name: CORENTE, JOSEPH N.
Address: 5801 N.E. 14TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DOP (X) Change () Addition
Name: CORENTE, JOSEPH N.
Address: 5801 N.E. 14TH AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33334 US

Title: DIR () Change (X) Addition
Name: WHITE, GREG DR.
Address: 5801 NE 14 AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33334 US

Title: DIR () Change (X) Addition
Name: ORTIZ, PRISCILLA
Address: 5801 NE 14 AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33334 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: JOSEPH N. CORENTE

DOP

04/09/2005

Electronic Signature of Signing Officer or Director

_____ Date