

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000070343

**FILED
Jun 21, 2005
Secretary of State**

Entity Name: BROTHER INSULATION INC.

Current Principal Place of Business:

3344 SW 154TH CT
MIAMI, FL 33185

New Principal Place of Business:

Current Mailing Address:

3344 SW 154TH CT
MIAMI, FL 33185

New Mailing Address:

FEI Number: 65-0941692 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CABRERA, LUIS E
3344 SW 154 COURT
MIAMI, FL 33185 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

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: PST () Delete
Name: CABRERA, LUIS E
Address: 3344 SW 154TH CT
City-St-Zip: MIAMI, FL 33185

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ALONSO, BLANCA A
Address: 3344 SW 154TH CT
City-St-Zip: MIAMI, FL 33185

Title: V () Change (X) Addition
Name: CABRERA, LUIS E
Address: 3344 SW 154TH CT
City-St-Zip: MIAMI, FL 33185

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: BLANCA A. ALONSO

PSTD

06/21/2005

Electronic Signature of Signing Officer or Director

_____ Date