

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000029124

**Entity Name:** ART FOAM INSULATION, LLC**Current Principal Place of Business:**3635 PARK CENTRAL BLVD  
POMPANO BCH, FL 33064**Current Mailing Address:**3635 PARK CENTRAL BLVD  
POMPANO BCH, FL 33064**FEI Number:** 27-2121952**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ADAK, TOLGA  
3635 PARK CENTRAL BLVD  
POMPANO BCH, FL 33064 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Authorized Person(s) Detail :**

Title VP  
Name ROCHA, ROOSEVELT M  
Address 3635 PARK CENTRAL BLVD  
City-State-Zip: POMPAN0 BCH FL 33064

Title MGRM  
Name BEACH, JOHN W  
Address 3635 PARK CENTRAL BLVD  
City-State-Zip: POMPAN0 BCH FL 33064

Title MGRM  
Name GALVAN, GERARDO  
Address 3635 PARK CENTRAL BLVD. N.  
City-State-Zip: POMPAN0 BEACH FL 33064

Title CEO  
Name DE SOUZA, REGINALDO A  
Address 3635 PARK CENTRAL BLVD  
City-State-Zip: POMPAN0 BCH. FL 33064

Title P  
Name ADAK, TOLGA  
Address 3635 PARK CENTRAL BLVD N  
City-State-Zip: POMPAN0 BCH FL 33064

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** REGINALDO A. DESOUZA

CEO

02/05/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date