

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

02 JUL 31 AM 9:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-08/07/02--01071--020
*****61.25 *****61.25

DO NOT WRITE IN THIS SPACE

DOCUMENT # P00000063124

1. Entity Name

A.C.I. Insulation, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1388 N.W. 126th Avenue

3. Mailing Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sunrise, Florida

City & State

4. FEI Number

65-1019827

Applied For

Not Applicable

Zip

33323

Country

U.S.A.

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

John Walter Templeton

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

1388 N.W. 126th Avenue

City

Sunrise

FL

Zip Code

33323

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
John Walter Templeton
1388 N.W. 126th Ave, Sunrise, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice President
Jesus Efrain Avila
329 S.W. 5th Avenue, Apt.# 2
Miami, FL 33130

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary/Treasurer
Lai-in Julie Yip
6555 W. Broward Blvd., #403C
Plantation, FL 33317

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

John TEMPLETON 7-1102 835-0424 (954)

CR2E034B (12/01)