

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000096014

Entity Name: IDEAL INSULATION, INC.

FILED
Jan 19, 2005
Secretary of State

Current Principal Place of Business:

4976 24 AVE SW
NAPLES, FL 34116

New Principal Place of Business:

1842 40TH TERRACE S.W.
6B
NAPLES, FL 34116

Current Mailing Address:

4976 24 AVE SW
NAPLES, FL 34116

New Mailing Address:

P.O.BOX 990024
NAPLES, FL 34116

FEI Number: 20-0178895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUIZ, RUBEN
4976 24 AVE SW
NAPLES, FL 34116 US

Name and Address of New Registered Agent:

RUIZ, RUBEN
2356 52ND TERRACE S.W.
NAPLES, FL 34116 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: RUBEN RUIZ

01/19/2005

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: RUIZ, RUBEN
Address: 4972 24 AVE SW
City-St-Zip: NAPLES, FL 34116

Title: V () Delete
Name: RODRIGUEZ, MARIO
Address: 3799 WHITE BLVD
City-St-Zip: NAPLES, FL 34117

Title: S () Delete
Name: REDES, DEMETRIO A
Address: 15010 COASTAL BAY #15205
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: RUIZ, RUBEN
Address: 2356 52ND TERRACE S.W.
City-St-Zip: NAPLES, FL 34116

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

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

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: RUBEN RUIZ

S

01/19/2005

Electronic Signature of Signing Officer or Director

Date