


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 04, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P04000172140</b> 1. Entity Name <b>ALEX INSULATION INC</b>	
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Principal Place of Business <b>1014 WEST BAKER ST APT B PLANT CITY, FL 33563</b>	Mailing Address <b>1014 WEST BAKER ST APT B PLANT CITY, FL 33563</b>
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**DO NOT WRITE IN THIS SPACE**



03292007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-2101086</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>BARRERA, ALEJANDRO 1014 W BAKER ST APT B PLANT CITY, FL 33563</b>	<b>DO NOT WRITE IN THIS SPACE</b>
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVS BARRERA, ALEJANDRO 1014 W BAKER ST APT B PLANT CITY, FL 33563
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LOZANO, EMPERATRIZ NAN 1014 WEST BAKER ST APT B PLANT CITY, FL 33563
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U000000690478  
04/11/07-80077-025 150.00

U000000690478  
04/11/07-80077-026 8.75

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with or without other like empowered.

**SIGNATURE:**  **ALEJANDRO BARRERA**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**3-24-07 813-659-9500**  
Date Daytime Phone #