2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000078127

HO, MARIA J

7968 NW 56 ST

DORAL, FL 33166

Name:

Address:

City-St-Zip:

FILED Apr 13, 2007 Secretary of State

Entity Name: ISIS HEAT SOLUTIONS INCORPORATED								
Current Principal Place of Business:			New Princ	New Principal Place of Business:				
712 NW 17 MIAMI, FL								
Current Mailing Address:			New Maili	New Mailing Address:				
712 NW 17 MIAMI, FL								
FEI Number:	20-3199002	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate o	of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:				
HO, MARIA 7968 NW 5 DORAL, FL	66 ST	3	10773 NW 136	HO, MARIA J 10773 NW 58 ST 136 DORAL, FL 33178 US				
The above in the State	named entity s of Florida.	submits this statement for the po	urpose of changing i	ts registered	d office or regis	stered agent, or b	ooth,	
SIGNATUR	RE:			04/13/2007				
	Electron	ic Signature of Registered Age	nt		Dat	te		
Election Can	npaign Financing	g Trust Fund Contribution ().						
OFFICERS	AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	P () RUIZ, JOSE M 712 NW 17 CT MIAMI, FL 331	Delete 25	Title: Name: Address: City-St-Zip:		() Change () A	Addition		
Title: Name: Address: City-St-Zip:	VP () HO, MAN FEI 7968 NW 56 ST DORAL, FL 33		Title: Name: Address: City-St-Zip:	VP HO, MAN FE 10773 NW 5 DORAL, FL	58 ST #136	Addition		
Title: Name: Address: City-St-Zip:	SEC () RUIZ, ELISABE 712 NW 17 CT MIAMI, FL 331		Title: Name: Address: City-St-Zip:		() Change () A	Addition		
Title:	SEC ()	Delete	Title:	SEC	(X) Change () A	Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

Name:

Address:

City-St-Zip:

HO, MARIA J

10773 NW 58ST #136

DORAL, FL 33178

SIGNATURE: MARIA J. HO SEC 04/13/2007