

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000031098

FILED
Apr 24, 2006
Secretary of State

Entity Name: ISAACS ROOFING & INSULATION CORPORATION

Current Principal Place of Business:

2035 NW 1ST PLACE
UNIT #1
MIAMI, FL 33127 US

New Principal Place of Business:

9245 SW 157 ST
SUITE 206
PALMETTO BAY, FL 33157 US

Current Mailing Address:

2035 NW 1ST PLACE
UNIT #1
MIAMI, FL 33127 US

New Mailing Address:

P O BOX 973135
MIAMI, FL 33197 US

FEI Number: 65-0405125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEL SOL, ISAIAS
2035 NW 1ST PLACE
UNIT #1
MIAMI, FL 33127 US

Name and Address of New Registered Agent:

DEL SOL, ISAIAS
9245 SW 157 ST
SUITE 206
PALMETTO BAY, FL 33157 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: ISAIAS DELSOL

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DEL SOL, ISAIAS
Address: 2035 NW 1ST PLACE, UNIT #1
City-St-Zip: MIAMI, FL 33127

Title: ST () Delete
Name: DEL SOL, CLARA
Address: 2035 NW 1ST PLACE, UNIT #1
City-St-Zip: MIAMI, FL 33127

Title: VP () Delete
Name: GONZALEZ, ALAIN I
Address: 2035 NW 1ST PLACE, UNIT #1
City-St-Zip: MIAMI, FL 33127 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DEL SOL, ISAIAS
Address: 9245 SW 157 ST., SUITE #206
City-St-Zip: PALMETTO BAY, FL 33157

Title: ST (X) Change () Addition
Name: DEL SOL, CLARA
Address: 9245 SW 157 ST., SUITE #206
City-St-Zip: PALMETTO BAY, FL 33157

Title: VP (X) Change () Addition
Name: GONZALEZ, ALAIN I
Address: 9245 SW 157 ST., SUITE #206
City-St-Zip: PALMETTO BAY, FL 33157 US

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.

SIGNATURE: CLARA DEL SOL

ST

04/24/2006

Electronic Signature of Signing Officer or Director

Date