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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000050079 (0)

| FILED | |
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| Mar 20 1998 8:00am | ì |
| Secretary of State | |

| B & H | INSULATION, INC. | | | | | engelle tit. | | | |
|---|---|---|-------------------------|-------------------|---------------------|--|-------------------|--|--|
| | | | | | | | | <u> </u> | |
| D. Control Division | 1 | NA-NI A | | | | <u> </u> | <u> </u> | | |
| Principal Place | | Mailing Address | | | | | | | |
| 1050 STARKEY ROAD 1050 STARKEY ROAD #2203 | | | | | | | | | |
| LARGO FL 33771 LARGO FL 33771 | | | | | | DO NOT WRITE IN THIS SPACE | | | |
| | | | | | | 3. Date Incorporated or Qualified | | | |
| | | | | | | 07/05/1994 | | | |
| 2. Principal Pi | ace of Business | 2a. Mailing Address | 2a. Mailing Address | | | 4, FEI Number | Applied For | | |
| 21 26 | | | | | | 59-3249431 | Not Applicable | | |
| Suite, Apt. | #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 | I | |
| 22 | | City & State | | | | | Fee Re | | |
| City & State | 3 | | City & State | | | 6, Election Campaign Financing Trust Fund Contribution | \$5.00 Added 1 | | |
| 23] | Country | 28 Zip | | | | This corporation owes or has paid the curre | | | |
| 24 | 25 | 29 | 30 | - 1, | | · · · · · · · · · · · · · · · · · · · | | No | |
| 24 | g. Name and Address of Curren | | 30 | | | 10. Name and Address of New Registered A | | - 1 | |
| HIC | KEY, BRIAN K | | | 81 | Name | | | | |
| | O ROBIN ROAD | | | 00 | 0 | (D.O. B. Marsharia Ned Assertable) | | | |
| | RGO FL 34647 | | | 82 | Street Addre | ess (P.O. Box Number is Not Acceptable) | | | |
| U • | 100 12 01011 | | | 83 | | | | | |
| | | | | | 0: | | 1421 50. | <u></u> | |
| | | | | 84 | City | FL | 85 Zip (| Code | |
| 11, Pursuant t | o the provisions of Sections 607,050 | 2 and 607.1508, Florida Statu | tes, the a | bove- | named corpo | oration submits this statement for the purpose of c | hanging it | s registered | |
| office or re | egi ste red agent, or both, in the State m familiar with, and accept the obliga | of Florida. Such change was ations of, Section 607,0505. F | authorize Iorida Sta | ed by itutes. | the corporation | on's board of directors. I hereby accept the appo | ntment as | registered | |
| SIGNATURE | | | | | | | | İ | |
| SIGNATURE . | Signature, typed or printed name of registered agn | ent and title if applicable. (NO | TE: Registere | d Agen | eriuper enutangia t | od when reinstating) DATE | | | |
| 12. | OFFICERS ANI | OFFICERS AND DIRECTORS 13 | | | | ADDITIONS/CHANGES TO OFFICERS AND I | | | |
| TITLE | P | DELETE 1.1 | | | | L | Change | Addition | |
| NAME | | | 1.2 N | | | | | | |
| STREET ADDRESS | | | | | ADDAESS | | | | |
| CITY-ST-ZIP | LARGO FL | I DELETE | | ITY-ST | - ZIP | | Change | Addition | |
| TITLE | A THUMEN DITTE | ☐ DELETE | 2.1 TI | | | : L | Change | Manifold | |
| NAME | | (1101.121) 0.1.1.1.1 | | IAME | | | | | |
| STREET ADDRESS | PRIVATEER ROAD | | | | ADDRESS | | | | |
| CITY-ST-ZIP | CHATTANOOGA TN | DELETE | 2.4 C | HY-SI | I - ZIP | | Change | Addition | |
| TITLE | | | | | | . . | ☐ Otteringe | | |
| NAME OTOTES ADDRESS | AAAA AAAA MAAAAAAAAAAAAAAAAAAAAAAAAAAA | | 3.2 N | | ADDRESS | | | | |
| STREET ADDRESS | ATLANTA GA 30306 | | | | | To the second of | | | |
| CITY-ST-ZIP | AIDANIA GA 30000 | ☐ DELET E | 4.1 T | CITY - ST FTLF | - 267 | | Change | Addition | |
| NAME | | <u></u> | | NAME | | - | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | | | ITY-ST | | | | | |
| TITLE | | ☐ DELETE | 5.1 TI | | | | Change | Addition | |
| NAME | | | 5.2 N | | | | - | | |
| STREET ADDRESS | | | 5.3 S | TREET A | ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 C | ITY-ST | -ZIP | | | | |
| TITLE | | DELETE | 6.1 TI | ITLE | | | Change | ☐ Addition | |
| NAME | | | 6.2 N | AME | | | | | |
| STREET ADDRESS | | | 6.3 S | TREET A | ADDRESS | | | | |
| CITY-ST-ZIP | | | | ITY-ST | | 120 | | | |
| | ertify that the information supplied w | ith this filing does not qualify ! | for the exe | emnti | on stated in S | Section 119.07(3)(i). Florida Statutes, Lifurther cert | fu that the | information | |

4. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

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