

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000074729

Entity Name: M & M INSULATION, INC.

FILED
Apr 14, 2008
Secretary of State

Current Principal Place of Business:

8209 W. CRENSHAW STREET
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

8209 W. CRENSHAW STREET
TAMPA, FL 33615

New Mailing Address:

FEI Number: 59-3342726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORDEIRO, JACK
8209 W. CRENSHAW STREET
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CORDEIRO, JACK
Address: 8209 W. CRENSHAW STREET
City-St-Zip: TAMPA, FL 33615

Title: D () Delete
Name: CORDEIRO, ALDA
Address: 8209 W. CRENSHAW STREET
City-St-Zip: TAMPA, FL 33615

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: MR. () Change (X) Addition
Name: CORDEIRO, TIMOTHY S
Address: 8801 ROCKSHIRE CT
City-St-Zip: TAMPA, FL 33634

Title: MR. () Change (X) Addition
Name: CORDEIRO, CHRISTOPHER J
Address: 2449 SHADECREST RD.
City-St-Zip: LAND O LAKES, FL 33439

I hereby certify that the information supplied with this filing does not qualify 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: ALDA CORDEIRO

OFF

04/14/2008

Electronic Signature of Signing Officer or Director

_____ Date