

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 04, 2001 08:00 AM**
Secretary of State**DOCUMENT # P98000000457**1. Entity Name
TRI-FED INSULATION, INC.

Principal Place of Business

5292 JADE CIRCLE

ORLANDO
32812

FL

Mailing Address

5292 JADE CIRCLE

ORLANDO
32812

FL

2. Principal Place of Business

5307 JADE CIRCLE

3. Mailing Address

5307 JADE CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ORLANDO

FL

City & State

ORLANDO

FL

Zip
32812

Country

Zip
32812

Country

4. FEI Number

59-3487431

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

JOVE MARIAN L
5292 JADE CIRCLEORLANDO FL
32812

7. Name and Address of New Registered Agent

Name

JOVE MARIAN L

Street Address (P.O. Box Number is Not Acceptable)

5307 JADE CIRCLE

City

ORLANDO

FL

Zip Code
32812

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.

SIGNATURE **MARIAN L. JOVE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

05/04/2001

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE VPST ☐ Delete
NAME JOVE MARIAN L
STREET ADDRESS 5292 JADE CIRCLE
CITY-ST-ZIP ORLANDO FLTITLE P ☐ Delete
NAME JOVE FEDERICA JR
STREET ADDRESS 5292 JADE CIRCLE
CITY-ST-ZIP ORLANDO FLTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VPST ☒ Change ☐ Addition
NAME JOVE MARIAN L
STREET ADDRESS 5307 JADE CIRCLE
CITY-ST-ZIP ORLANDO FLTITLE P ☒ Change ☐ Addition
NAME JOVE FEDERICO JR
STREET ADDRESS 5307 JADE CIRCLE
CITY-ST-ZIP ORLANDO FLTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Federico Jove, Jr.**

Pres

05/04/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)