2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0300002983

Entity Name: INTERNAL DRIVE INC.

Current Principal Place of Business:

910 E HAMILTON AVE. SUITE 300 CAMPBELL, CA 95008

Current Mailing Address:

910 E HAMILTON AVE. SUITE 300 SUITE 300 CAMPBELL, CA 95008 US

FEI Number: 77-0505298

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	MARK WILLIAMS		
	Electronic Signature of Registered Agent		Date
Officer/Dire	ctor Detail :		
Title	DIRECTOR	Title	DIRECTOR
Name	INGRAM-CAUCHI, ALEXA	Name	INGRAM-CAUCHI, PETE
Address	910 E HAMILTON AVE. SUITE 300	Address	910 E HAMILTON AVE SUITE 300
City-State-Zip:	CAMPBELL CA 95008	City-State-Zip:	CAMPBELL CA 95008
Title	DIRECTOR	Title	DIRECTOR
Name	FARR, PAULL	Name	KELLY, BRYAN
Address	910 E HAMILTON AVE SUITE 300	Address	910 E HAMILTON AVE SUITE 300
City-State-Zip:	CAMPBELL CA 95008	City-State-Zip:	CAMPBELL CA 95008
Title	DIRECTOR	Title	DIRECTOR
Name	BAUMEL, MATT	Name	BEHAR, HOWARD
Address	910 E HAMILTON AVE SUITE 300	Address	910 E HAMILTON AVE SUITE 300
City-State-Zip:	CAMPBELL CA 95008	City-State-Zip:	CAMPBELL CA 95008
Title	PRESIDENT	Title	VICE-PRESIDENT
Name	INGRAM-CAUCHI, PETE	Name	INGRAM-CAUCHI, PETE
Address	910 E HAMILTON AVE SUITE 300	Address	910 E HAMILTON AVE SUITE 300
City-State-Zip:	CAMPBELL CA 95008	City-State-Zip:	CAMPBELL CA 95008

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I hereby 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 all other like empowered.

SIGNATURE: PETE INGRAM-CAUCHI

PRESIDENT

03/27/2020

Electronic Signature of Signing Officer/Director Detail

FILED Mar 27, 2020 Secretary of State 1951053219CC

Certificate of Status Desired: No

Officer/Director Detail Continued :

Title	SECRETARY	Title	TREASURER
Name	LOVINSKY, ILAN	Name	INGRAM-CAUCHI, PETE
Address	910 E HAMILTON AVE SUITE 300	Address	910 E HAMILTON AVE, SUITE 300
City-State-Zip:	CAMPBELL CA 95008	City-State-Zip:	CAMPBELL CA 95008