

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000010869

Entity Name: INTELHOMES INC.

FILED  
Oct 05, 2006  
Secretary of State

**Current Principal Place of Business:**

1060 ARDMORE ST.  
ST. AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

1060 ARDMORE ST.  
ST. AUGUSTINE, FL 32092

**New Mailing Address:**

FEI Number: 11-3742185

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

CHRISTOPHER SPRINGHORN CPA PA  
2120 US HWY 1 S  
SUITE 111  
ST AUGUSTINE, FL FL 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: CHRISTOPHER SPRINGHORN

10/05/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: OLIVIER, PIERRE  
Address: 1060 ARDMORE ST.  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: VSD ( ) Delete  
Name: ERASMUS, LOURENS J  
Address: 1060 ARDMORE ST.  
City-St-Zip: ST. AUGUSTINE, FL 32092

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: PIERRE OLIVIER

PTD

10/05/2006

Electronic Signature of Signing Officer or Director

Date