

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000064426

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** DANIEL RISK MITIGATION, INC.

**Current Principal Place of Business:**

3212 W SANTIAGO ST  
A  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

3212 W SANTIAGO ST  
A  
TAMPA, FL 33629

**New Mailing Address:**

**FEI Number:** 20-4835613

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

O'SHEA, DANIEL P  
3212 W SANTIAGO ST  
A  
TAMPA, FL 33629 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:** DANIEL PATRICK O'SHEA

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PSD  
**Name:** O'SHEA, DANIEL P  
**Address:** 3212 W SANTIAGO ST SUITE A  
**City-St-Zip:** TAMPA, FL 33629

**Title:** CEO  
**Name:** O'SHEA, DANIEL P  
**Address:** 3212 W SANTIAGO ST SUITE A  
**City-St-Zip:** TAMPA, FL 33629

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:** DANIEL PATRICK O'SHEA

CEO

01/06/2012

Electronic Signature of Signing Officer or Director

Date