

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P10000054917

**Entity Name:** INTREPID VENTURES INC.

**FILED**  
**Nov 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3571 FLAT ROCK STREET  
CARLSBAD, CA 92010 US

**New Principal Place of Business:**

3020 LAMBERTON BLVD #111  
ORLANDO, FL 32825 US

**Current Mailing Address:**

3571 FLAT ROCK STREET  
CARLSBAD, CA 92010 US

**New Mailing Address:**

3020 LAMBERTON BLVD #111  
ORLANDO, FL 32825 US

**FEI Number:** 61-1618962

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

TORRES, JASON  
1569 DEMING DRIVE  
ORLANDO, FL 32825 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:** JASON TORRES

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** IRIZARRY, MILADY  
**Address:** 1569 DEMING DRIVE  
**City-St-Zip:** ORLANDO, FL 32825 US

**Title:** D  
**Name:** TORRES, JASON  
**Address:** 1569 DEMING DRIVE  
**City-St-Zip:** ORLANDO, FL 32825 US

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:** MILADY IRIZARRY

**PRES**

**11/15/2011**

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date