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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90051 006 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000053288

1. Corporation Name

INTREPID GLOBAL INDUSTRIES, INC.

Principal Place of Business

2785 OAK PARK CT
TALLAHASSEE FL 32308

Mailing Address

2785 OAK PARK CT
TALLAHASSEE FL 32308

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/17/1997

4. FEI Number

59-3454584

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 837 A Keene Rd.

Suite, Apt. #, etc.

2a. Mailing Address

26 PO Box 4367

Suite, Apt. #, etc.

22 City & State

23 Clearwater, FL

24 33755 25 USA

27 City & State

28 Clearwater, FL

29 33758 30 USA

9. Name and Address of Current Registered Agent

REINHARD, TERRIL
2735 OAK PARK CT
TALLAHASSEE FL 32308

10. Name and Address of New Registered Agent

81 Name

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

83 837 N. Keene Rd.

84 Apt. A.

City
Clearwater

FL

85 Zip Code
33755

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/4/99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME REINHARD, TERRIL
STREET ADDRESS 2785 OAK PARK CT
CITY-STATE-ZIP TALLAHASSEE FL 32308

TITLE D ☐ DELETE

NAME REINHARD, LUIZA C
STREET ADDRESS 2785 OAK PARK CT
CITY-STATE-ZIP TALLAHASSEE FL 32308

TITLE D ☐ DELETE

NAME REINHARD, MICHELLE
STREET ADDRESS 2203 SE 11TH ST
CITY-STATE-ZIP CAPE CORAL FL 33990

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Reinhard, Terril
1.3 STREET ADDRESS 837 N. Keene Rd., Apt. A
1.4 CITY-STATE-ZIP Clearwater, FL 33755

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME Reinhard, Luiza Chalapek
2.3 STREET ADDRESS 837 N. Keene Rd., Apt. A
2.4 CITY-STATE-ZIP Clearwater, FL 33755

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

4/4/99 (850) 385-6390

CR2E034 (1/98)