

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 04, 2000 08:00 AM****Secretary of State****DOCUMENT # P99000067046****1. Entity Name**

INTREPID LAND USE SERVICES, INC.

Principal Place of Business

1205 NE 16TH AVENUE

FORT LAUDERDALE
33304

FL

Mailing Address

1205 NE 16TH AVENUE

FORT LAUDERDALE
33304

FL

2. Principal Place of Business

2764 NE 33RD STREET

3. Mailing Address

2764 NE 33RD STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
FORT LAUDERDALE FLCity & State
FORT LAUDERDALE FL**4. FEI Number****65-0937311**

Applied For

Not Applicable

Zip
33306

Country

Zip
33306

Country

5. Certificate of Status Desired☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**CULP SENTA M
1205 NE 16TH AVENUEFORT LAUDERDALE
33304

FL

7. Name and Address of New Registered Agent**Name**

CULP SENTA M

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

2764 NE 33RD STREET

City
FORT LAUDERDALE

FL

Zip Code
33306**8. 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**

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

(NOTE: Registered Agent signature required when reinstating)

01/04/2000

DATE

**9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)**☒**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State****10. Election Campaign Financing
Trust Fund Contribution.**☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	33304	<input type="checkbox"/> Delete
		CULP SENTA M	1205 NE 16TH AVENUE				

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TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	33304	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	33306	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
		CULP SENTA M	2764 NE 33RD STREET					

TITLE	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	33306	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.**SIGNATURE:** Santa M. Culp

D 01/04/2000