03-11-1999 90195 047 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G20272

1. Corporation Name

DISTRIBUTED INNOVATIONS, INC.

Principal Place of Business Mailing Address							1 belief the first series were the series and series and						
4119 N SR 7			1330 N.W. 44TH COURT										
STE 7012 C/O LAWRENCE E. ERMER								DO NOT WRITE IN THIS SPACE					
FT LAUDERDALE FL 33319 FT. LAUDERDALE FL 33309								3. Date Incorporated or Qualifed					
US							•	01/25/1983					
2 Principal P	lane of Business	22	Mailing Address				4.	FEI Number	-	T,	Appl	ied For	
2. Principal Place of Business			26					65-0124140		Ė	Not /	Applicable	
Suite, Apt.	#. etc.	1201	Suite, Apt. #, etc.		_		1_			\$8.7	5 Ad	ditional	
22			27				5.	Certificate of Status Desired		Fe	e Req	uired	
City & State	e		City & State				6.	Election Campaign Financing		\$5.	00 м	lay Be	
23		28					}	Trust Fund Contribution		Add	led to	Fees	
Zip Country			Zip Country				8.	This corporation owes the curr	ent year Int			_	
24	25	29		30				Personal Property Tax.	-	Yes		No	
	9. Name and Address of Curren	t Regis	tered Agent				10.	Name and Address of New F	egistered	Agent			
				81	١	Name						Ì	
	ER, LAWRENCE E.			82	+	Street Addre	ess (P	O. Box Number is Not Accepta	ble)	•		1	
1330 NORTHWEST 44TH COURT													
FOR	T LAUDERDALE FL 33309			83	3							ļ	
				84	+	City				85	Zip Co	ode	
					ı	•			FL	. []	•		
office or o	to the provisions of Sections 607.050/ egistered agent, or both, in the State of m familiar with, and accept the obligation	of Florid ions of,	la. Such change was a Section 607.0505, Flo	uthorized by rida Statute:	/ II S.	ne corporatio	n s do	pard of directors, I hereby acces	t the appoi	ntment a	s regi	stered	
	Signature, typed or printed name of registered agen				ent	signature required		reinstating) ADDITIONS/CHANGES TO OF		ID DIDE	CTOR	S IN 12	
12.	OFFICERS AN	D DIKE	DELETE	13. 1.1 TITLE				ADDITIONS/CHANGES TO OF	IOLINO AI	☐ Cha		Addition	
TITLE				1.2 NAME									
NAME	ERMER, LAWRENCE E.					4DDDCCC						}	
STREET ADDRESS	1330 NW 44TH CT				STREET ADDRESS							ļ	
CITY-ST-ZIP	FT LAUDERDALE FL		[] DELETE	1.4 CITY-ST-ZIP		- ZIP				Cha	nae	Addition	
TITLE	D	☐ DELETE			2.1 TITLE								
NAME	ERMER, REBECCA LARSEN			2.2 NAME								İ	
STREET ADDRESS	1330 NW 44TH COURT			2.3 STREE		1				~	-		
CITY-ST-ZIP	FT LAUDERDALE FL		DELETE	2.4 CITY-	_	-ZIP			_	☐ Cha	nge	☐ Addition	
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NAME				3 2 NAME									
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TITLE													
NAME				4. 2 NAME		4000000						Ì	
STREET ADDRESS						ADDRESS		•					
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NAME						ADDRESS		•					
STREET ADDRESS				5.4 CITY-		ĭ						' \	
CITY-ST-ZIP			DELETE	6.1 TITLE		- LIF				☐ Cha		Addition	
TITLE	!			V.1 111EE							9"		
NAME	1			6.2 NAME		l						ļ	

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 of supplemental binding phone 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, pr on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR