

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90184 013 ***150.00

DOCUMENT # H66204

1. Entity Name
DISTINCTIVE ENTERPRISES, INC.



Principal Place of Business
**1406 OLD DIXIE HIGHWAY SW
VERO BEACH FL 32962
US**

Mailing Address
**460 10TH ST. SW
VERO BEACH FL 32962**

2. Principal Place of Business

3. Mailing Address

2030 OLD DIXIE HWY SW
Suite, Apt. #, etc.
#1

Suite, Apt. #, etc.

City & State
VERO BEACH

City & State

Zip
32962

Country
INDIAN RIVER

Zip

Country

4. FEI Number
59-2572312

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CLARK, ROBERT C.
1601-20TH STREET
VERO BEACH FL 32960**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **BEAUMIER, EDWARD**
STREET ADDRESS **460 10TH ST SW**
CITY-ST-ZIP **VERO BCH FL 32962**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **BEAUMIER, EDWARD**
STREET ADDRESS **460 10TH ST SW**
CITY-ST-ZIP **VERO BCH FL 32962**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME **BEAUMIER, EDWARD**
STREET ADDRESS **460 10TH ST SW**
CITY-ST-ZIP **VERO BCH FL 32962**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME **BEAUMIER, EDWARD**
STREET ADDRESS **460 10TH STREET SW**
CITY-ST-ZIP **VERO BEACH FL 32962**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-27-03

Date

772-562-4700

Daytime Phone #

CR2E034 (10/02)