

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000041827

Entity Name: DI DISTRIBUTING, INC.

FILED  
Apr 30, 2007  
Secretary of State

## Current Principal Place of Business:

2875 WINDSWEPT DRIVE  
APT. 201  
LANTANA, FL 33462

## Current Mailing Address:

2875 WINDSWEPT DRIVE  
APT. 201  
LANTANA, FL 33462

## New Principal Place of Business:

10062 STONEHENGE CIRCLE  
APT. 116  
BOYNTON BEACH, FL 33437

## New Mailing Address:

10062 STONEHENGE CIRCLE  
APT. 116  
BOYNTON BEACH, FL 33437

FEI Number: 20-4579548

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PRESIDENTIAL SERVICES INCORPORATED  
1217 CAPE CORAL PARKWAY  
#300  
CAPE CORAL, FL 33904 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SALTER, DANIEL  
Address: 2875 WINDSWEPT DRIVE  
City-St-Zip: LANTANA, FL 33462 US

Title: D ( ) Delete  
Name: MACEDON, ISULAH  
Address: 2875 WINDSWEPT DRIVE  
City-St-Zip: LANTANA, FL 33462 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SALTER, DANIEL  
Address: 10062 STONEHENGE CIRCLE, APT. 116  
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: D (X) Change ( ) Addition  
Name: MACEDON, ISULAH  
Address: 10062 STONEHENGE CIRCLE, APT. 116  
City-St-Zip: BOYNTON BEACH, FL 33437 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ISULAH MACEDON

D

04/30/2007

Electronic Signature of Signing Officer or Director

Date