

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000080418 (4)

1. Corporation Name

PLATINUM COAST AUTO, INC.

Principal Place of Business

2811 CLEVELAND AVE
SUITE 101
FT MYERS FL 33901
US

Mailing Address

1356 MONARCH CIRCLE
NAPLES FL 33999



2. Principal Place of Business

21 Suite, Apt #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

CIOCCA, DANIEL A JR.
1356 MONARCH CIRCLE
NAPLES FL 33999

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified
11/01/1994

3a. Date of Last Report
06/16/1995

4. FLEIN Number
65-0531917

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has facility for intangible tax under s. 193.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0102 and 607.1506, 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 607.0103, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
PVTS	CIOCCA, DANIEL A JR	1356 MONARCH CIRCLE	NAPLES FL	☐
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP	DELETE	Change	Addition
1. TITLE	1. NAME	1. STREET ADDRESS	1. CITY, ST, ZIP	☐	☐	☐
2. TITLE	2. NAME	2. STREET ADDRESS	2. CITY, ST, ZIP	☐	☐	☐
3. TITLE	3. NAME	3. STREET ADDRESS	3. CITY, ST, ZIP	☐	☐	☐
4. TITLE	4. NAME	4. STREET ADDRESS	4. CITY, ST, ZIP	☐	☐	☐
5. TITLE	5. NAME	5. STREET ADDRESS	5. CITY, ST, ZIP	☐	☐	☐
6. TITLE	6. NAME	6. STREET ADDRESS	6. CITY, ST, ZIP	☐	☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not certify for the exceptions stated in Section 119.07(5)(b), Florida Statutes. I further certify that I am an officer or director of the corporation or the person or persons authorized to execute this report or required by Chapter 637, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Daniel A. Ciocca Jr.* DANIEL A. CIOCCA JR.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/96 941-455-9855

CR2E034 (12/95)