2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000055535

PLATINUM TELEVISION GROUP, INC.



FILED Apr 25, 2005 08:00 AM **Secretary of State**

Principal Place of Business

1000 EAST HILLSBORO BLVD

SUITE 105

DEERFIELD BEACH, FL 33441

Mailing Address

1000 EAST HILLSBORO BLVD

SUITE 105

DEERFIELD BEACH, FL 33441



01132005

No Cha-P

CR2E034 (10/03)

4. FEI Number 65-0844814

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SCOTT, DOUG 1000 EAST HILLSBORO BLVD **SUITE 105** DEEDELD DEACH EL 22444

DO NOT WRITE IN THIS SPACE

DEEM IEED BEACH, FE 33441			iit iiiio oi Aol			
8. The above the obligat	e named entity submits this statement for the pations of registered agent.	ourpose of changing its registere	d office or i	egistered agent, or bo	oth, in the State of Florida. I am fami	liar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	Honolinable (NOT) Postatore	A	1-1		
	Ogradue, typed or printing name or registered again and die	ii applicable (NOTE: Registerec	Agent signatur	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000328581 04/25/05-80077-022	150.00
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCOTT, DOUG 1000 EAST HILLSBORO BLVD SUITE DEERFIELD BEACH, FL 33441	E 105				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURTON, WALTER 1000 EAST HILLSBORO BLVD SUITE 105 DEERFIELD BEACH, FL 33441					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME				IN .	THIS SPACE	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 of trustee empty learned 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 attachme

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP