## ,2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE;

DOCUMENT # A9600002402  1. Entity Name PLATINUM MARINE, LTD.					
					SECRETARY OF STATE DIVISION OF CORPORATIONS
Principal Place of Business % PLATINUM INVESTMENT. INC. 4300 CATALFUMO WAY PALM BEACH GARDENS FL 33410		Mailing Address % PLATINUM INVESTMENT. INC. 4300 CATALFUMO WAY PALM BEACH GARDENS FL 33410-4248		0-4248	00 APR 21 AM 3: 05
2. Principal Place of Business		3. Mailing Address			רומין ופון פוופה וופון פווסה פווסה ווופה ווופה ווופה ווופה בוופה בוופה בוופה בוופה בוופה בפור בפור בפור בפור ב 
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE
. City & State		City & State			4. FEI Number 65-6253365 Applied For Not Applicable
Zip	Country	Zip	Cour	ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		_Name	7. Name and Address of New Registered Agent
PLATINUM INVESTMENT, INC. 4300 CATALFUMO WAY PALM BEACH GARDENS FL 33410				Street Address (P.O. Box Number is Not Acceptable)	
				City	City FL Zip Code
8 The above	named entity submits this statement to	the purpose of changing its	reaister	red office or regist	tered agent, or both, in the State of Florida.
SIGNATURE.	Signature, typed or printed name of registered agent			ed Agent signature requi	
9. Capital Contributions as Shown on record.  \$10,000.00  10. Amount of Capital Contributions in FLORIDA to date.					11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
as onowire	A GENERAL PARTNER T	HAT IS A BUSINESS EN	ITITY N	MUST BE REGIS	STERED AND ACTIVE WITH THIS OFFICE. ent must be filed to change a general partner.
12.	GENERAL PARTNER		13.		ADDRESS CHANGES ONLY
DOCUMENT# NAME STREET ADDRESS	M48600 PLATINUM INVESTMENT, INC. 4300 CATALFUMO WAY			REET ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS FL 334	10	СП	Y-ST-ZIP	
DOCUMENT # NAME			STF	REET ADDRESS	/000032491873 -05/12/0001003022 ****158.75 ****158.75
STREET ADDRESS CITY - ST - ZIP			сп	Y-ST-ZIP	*****158.75
DOCUMENT# NAME	e e e e e e e e e e e e e e e e e e e		STF	REET ADORESS	7000032491873
STREET ADDRESS CITY-ST-ZIP	,		СІТ	Y-ST-ZIP	-05/12/0001003023 ******8.75 ******8.75
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STREET ADDRESS CITY-ST-ZIP				Y-ST-20P	
DOCUMENT # NAME			STI	REET ADORESS	
STREET ADORESS CITY-ST-ZIP				Y-ST-ZIP	
DOCUMENT# NAME				REET ADORESS	
STREET ANDRESS CITY-ST-ZIP				Y-ST-ZIP	
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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					

NERAL PARTNER Daniel S. Catalfum 4/18/00 561-694-3000