

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90048 032 ****55.00

DOCUMENT # L02000020354

1. Entity Name

PLATINUM JET MANAGEMENT LLC



Principal Place of Business

**1451 W. CYPRESS CREEK RD., STE. 300
FORT LAUDERDALE FL 33309**

Mailing Address

**1451 W. CYPRESS CREEK RD., STE. 300
FORT LAUDERDALE FL 33309**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

42-1545947

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**KERLEW, MICHAEL
2213 E. ATLANTIC BLVD.
POMPANO BEACH FL 33062**

7. Name and Address of New Registered Agent

Name **SELWYN PATRICK GORDON**

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

1321 COVE LAKE ROAD

City

N. LAUDERDALE

FL

Zip Code

33068-4632

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

Stefan Budhan

SELWYN PATRICK GORDON

01-08-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

| | | |
|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P BRASSINGTON, MICHAEL 1451 W. CYPRESS CREEK RD., STE. 300 FORT LAUDERDALE FL 33309 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V BUDHAN, ANDRE 1451 W. CYPRESS CREEK RD., STE. 300 FORT LAUDERDALE FL 33309 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T BRASSINGTON, PAUL 1451 W. CYPRESS CREEK RD., STE. 300 FORT LAUDERDALE FL 33309 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

10. ADDITIONS/CHANGES

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Andre Budhan **SIGNATURE REQUIRED**

01-08-03

954-958-0312

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)

0024511