

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 SEP 14 PM 12:05

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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|--|
| DOCUMENT # L04000002652 1. Entity Name PLATINUM FINANCIAL SUITE 202, LLC | | | | | |
| Principal Place of Business 2799 N.W. BOCA RATON BLVD., SUITE 202 BOCA RATON, FL 33432 | | | Mailing Address 2799 N.W. BOCA RATON BLVD., SUITE 202 BOCA RATON, FL 33432 | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | Country | Zip | Country | 09132006 Chg-LLC CR2E083 (11/05) | |
| 4. FEI Number 34-2000410 | | | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | | | \$5.00 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | | 7. Name and Address of New Registered Agent | | |
| FILINGS, INC. 3732 N.W. 16TH STREET FT. LAUDERDALE, FL 33311-4132 | | | Name Dino A. Romano Street Address (P.O. Box Number is Not Acceptable) 2799 N.W. Boca Raton Blvd., Suite 202 City Boca Raton FL Zip Code 33432 | | |
| 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 <small>Signature, typed or printed name of registered agent and title if applicable.</small> | | | DATE 9/14/06 <small>(NOTE: Registered Agent signature required when reinstating)</small> | | |
| Amended AR is \$50.00 | | Make check payable to Florida Department of State | | | |
| 9. MANAGING MEMBERS/MANAGERS | | | 10. ADDITIONS/CHANGES | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM COADY, JOHN <input checked="" type="checkbox"/> Delete 353 N.E. 3RD AVENUE DELRAY BEACH, FL 33444 | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition 700080043617 09/21/06--01061--012 **50.00 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM ROMANO, DINO A <input type="checkbox"/> Delete 2799 NW BOCA RATON BLVD, STE 202 BOCA RATON, FL 33431 | | 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"/> Delete | | 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"/> Delete | | 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"/> Delete | | 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 exemptions contained in Chapter 119, 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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small> | | | DATE 9/14/06 <small>Date Daytime Phone #</small> | | |

CERTIFICATE DESIGNATING CHANGE
OF
REGISTERED AGENT

In compliance with section 608.416 or 608.508, Florida Statutes, the following is submitted:

1. Name of the Limited Liability Company is PLATINUM FINANCIAL SUITE 202, LLC.
2. The date of filing or registration in Florida was January 9, 2004.
3. The document number is L04000002652.
4. The current Registered Agent is Filings, Inc., and the street address of the Registered Office is 3732 N.W. 16th Street, Ft. Lauderdale, Florida 33311.
5. Name of the successor Registered Agent is Dino A. Romano.
6. The street address of the new Registered Office is 2799 NW Boca Raton Blvd., Suite 202, Boca Raton, FL 33431.
7. Such change of Registered Agent and Registered Office was authorized by an affirmative vote of the Members of the Limited Liability Company or as otherwise provided in the Articles of Organization or the Operating Agreement of the above named Limited Liability Company.

Date:

9/14/06

Signature

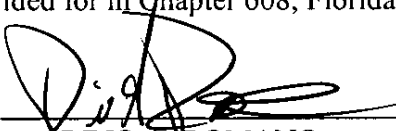

DINO A. ROMANO

I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent as provided for in Chapter 608, Florida Statutes.

Date:

9/14/06

Signature


DINO A. ROMANO