

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000002377

FILED
Jan 17, 2006
Secretary of State

Entity Name: PLATINUM PROPERTIES, LC

Current Principal Place of Business:

16824 89TH PLACE NORTH
LOXAHATCHEE, FL 33470

New Principal Place of Business:

PO BOX 292893
DAVIE, FL 33329

Current Mailing Address:

16824 89TH PLACE NORTH
LOXAHATCHEE, FL 33470

New Mailing Address:

PO BOX 292893
DAVIE, FL 33329

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEDINA, DAMARIS L
16824 89TH PLACE N
LOXA HATCHEE, FL 33470 US

Name and Address of New Registered Agent:

MEDINA, DAMARIS L
12687 NW 56 DRIVE
PARKLAND, FL 33076 US

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.

SIGNATURE: DAMARIS L. MEDINA

01/17/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MEDINA, DAMARIS L
Address: 16824 89TH PLACE N
City-St-Zip: LOXAHATCHEE, FL 33470

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MEDINA, DAMARIS L PRES
Address: 12687 NW 56 DRIVE
City-St-Zip: PARKLAND, FL 33076 US

Title: MGR () Change (X) Addition
Name: MEDINA, JAIME MGR
Address: 12687 NW 56 DRIVE
City-St-Zip: PARKLAND, FL 33076 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DAMARIS L. MEDINA

PRES

01/17/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date