

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000003253

1. Entity Name
PLATINUM ROAD WAREHOUSES, LLC



Principal Place of Business
621 LAKE DORA ROAD
MOUNT DORA, FL 32757

Mailing Address
POST OFFICE BOX 1045
MOUNT DORA, FL 32756

FILED

2007 MAR -1 AM 10: 21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01092007 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number
26-2802745

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

MATHESON, MICHAEL M
621 LAKE DORA ROAD
MOUNT DORA, FL 32757

**DO NOT WRITE
IN THIS SPACE**

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

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

1/22/07

DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
MATHESON, MICHAEL M
621 LAKE DORA ROAD
MOUNT DORA, FL 32757

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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03/06/07--01022--022 **50.00

**DO NOT WRITE
IN THIS SPACE**

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: *[Signature]*

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

Date

Daytime Phone #