

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2006 8:00 am
Secretary of State

04-26-2006 90026 040 ****50.00

DOCUMENT # L05000008147

1. Entity Name
PLATINUM AIR SERVICES, LLC



Principal Place of Business
**26840 SHOREGRASS DR.
WESLEY CHAPEL, FL 33543**

Mailing Address
**26840 SHOREGRASS DR.
WESLEY CHAPEL, FL 33543**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04122006 Chg-LLC CR2E083 (11/05)

4. FEI Number

20-2116817

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MATKIN, CHRIS
244 - 115TH AVE. N #3
ST. PETERSBURG, FL 33716**

Name

Matkin, Chris

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

26840 Shoregrass Drive

City

Wesley Chapel

FL

Zip Code

33543

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

Chris Matkin OWNER

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

(NOTE: Registered Agent signature required when reinstating)

4/11/06

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**MGRM
MATKIN, CHRIS
244 - 115TH AVE. N #3
ST. PETERSBURG, FL 33716**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**Mgrm
Chris Matkin
26840 Shoregrass Drive
Wesley Chapel, FL 33543**

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
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☐ Change ☐ 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:

Chris Matkin

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

4/11/06

Date

813-745-6276

Daytime Phone #