

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000127590

FILED  
Jul 11, 2008  
Secretary of State

Entity Name: INTERNATIONAL PLATINUM LLC

**Current Principal Place of Business:**

6798 63RD WAY N  
PINELLAS PARK, FL 33781

**New Principal Place of Business:**

10426 65TH AVE N  
SEMINOLE, FL 33772

**Current Mailing Address:**

PO BOX 2631  
PINELLAS PARK, FL 33780

**New Mailing Address:**

10426 65TH AVE N  
SEMINOLE, FL 33772

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

WELLINGTON, BRADY G  
6798 63RD WAY N  
PINELLAS PARK, FL 33781 US

**Name and Address of New Registered Agent:**

MARKETING WEBTRAFFIC COM, INC  
10426 65TH AVE N  
SEMINOLE, FL 33772 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: RICK CROSBY

07/11/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: WELLINGTON, BRADY G  
Address: 6798 63RD WAY N  
City-St-Zip: PINELLAS PARK, FL 33781 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: WELLINGTON, BRADY G  
Address: 5800 19TH AVE N  
City-St-Zip: SAINT PETERSBURG, FL 33710 US

I hereby certify that the information supplied with this filing does not qualify 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: BRADY G WELLINGTON

MGR

07/11/2008

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