

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000131109

**FILED**  
**Aug 30, 2012**  
**Secretary of State**

**Entity Name:** PLATINUM ELITE SOLUTIONS, LLC

**Current Principal Place of Business:**

8544 N.W. 166TH ST.  
DORAL, FL 33166 US

**New Principal Place of Business:**

8544 N.W. 66TH ST.  
MIAMI, FL 33166 US

**Current Mailing Address:**

8544 N.W. 166TH ST.  
DORAL, FL 33166 US

**New Mailing Address:**

8544 N.W. 66TH ST.  
MIAMI, FL 33166 US

**FEI Number:** 45-3830123

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PITMAN, ROSEMARY  
8544 N.W. 66 STREET  
DORAL, FL 33166 US

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

PITMAN, ROSEMARY  
8544 N.W. 66 STREET  
MIAMI, FL 33166 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:**

08/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** CRUZ, CAMILO  
**Address:** 8544 N.W. 66TH STREET  
**City-St-Zip:** MIAMI, FL 33166 US

**Title:** MGRM  
**Name:** PITMAN, ROSEMARY  
**Address:** 8544 N.W. 66TH STREET  
**City-St-Zip:** MIAMI, FL 33166 US

**Title:** MGR  
**Name:** PITMAN, ROSEMARY  
**Address:** 8544 N.W. 66TH STREET  
**City-St-Zip:** MIAMI, FL 33166 US

I hereby 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:** CAMILO CRUZ

CEO

08/30/2012

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