

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000007885

1. Entity Name

PLATINUM ALL-STARS INCORPORATED

Principal Place of Business

16751 SLATER RD.
NORTH FT. MYERS FL 33917

Mailing Address

16751 SLATER RD.
NORTH FT. MYERS FL 33917

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

USA

4. FEI Number

65-1059344

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MUSTO, DIANNA L
16751 SLATER RD.
NORTH FT. MYERS FL 33917

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

Dianna L. Musto Dianna L. Musto President

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

(NOT Registered Agent signature required when reinstating)

DATE

5/1/01

FILE NOW:
FEE IS \$81.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	MUSTO, DIANNA L	
STREET ADDRESS	16751 SLATER RD.	
CITY-ST-ZIP	NORTH FT. MYERS FL 33917	
TITLE	TD	☒ Delete
NAME	MUSTO, RICHARD P	
STREET ADDRESS	16751 SLATER RD.	
CITY-ST-ZIP	NORTH FT. MYERS FL 33917	
TITLE	SD	☒ Delete
NAME	MUSTO, THERESA P	
STREET ADDRESS	24 GALANTE CT.	
CITY-ST-ZIP	FT. MYERS FL 33912	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☐ Change ☒ Addition
NAME	Vice President Director	
STREET ADDRESS	Kenneth Deuding	
CITY-ST-ZIP	166 B Pompano DR. St. Petersburg, FL 33705	
TITLE	D	☐ Change ☒ Addition
NAME	Secretary Director	
STREET ADDRESS	Kathy Holland	
CITY-ST-ZIP	17998 Leetana Rd. N. Ft. Myers, FL 33917	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

Dianna L. Musto Dianna L. Musto

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/1/01

Daytime Phone #

941-567-1501

5/
FILED
Jun 22, 2001 8:00 am
Secretary of State

05-29-2001 90004 027 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)