

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # P00000028727**

1. Entity Name  
**PLATINUM AIR CARGO, INC.**



Principal Place of Business  
**700 SOUTH ROYAL POINCIANA BLVD.  
SUITE: 1000  
MIAMI SPRINGS, FL 33166**

Mailing Address  
**700 SOUTH ROYAL POINCIANA BLVD.  
SUITE: 1000  
MIAMI SPRINGS, FL 33166**



01082007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **04-3668640** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**DEPONTES, LEANDRO  
700 SOUTH ROYAL POINCIANA BLVD.  
SUITE: 1000  
MIAMI SPRINGS, FL 33166**

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

(NOTE: Registered Agent signature required when reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**000000747527**  
**05/17/07-80030-007 158.75**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PTD  
DEPONTES, LEANDRO  
700 SOUTH ROYAL POINCIANA BLVD SUITE: 1000  
MIAMI SPRINGS, FL 33166**

TITLE  
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IN THIS SPACE**

12. 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 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 607, 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:**

**LEANDRO DEPONTES**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**05/01/07**  
Date

**35.888.2227**  
Daytime Phone #