

FILED  
May 30, 2003 8:00 am  
Secretary of State

05-30-2003 90086 029 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000104510

1. Entity Name  
**PLATINUM WIRE & CABLE, INC.**



Principal Place of Business  
3301 NW 22ND TERR  
700 F  
POMPANO BEACH, FL 33069

Mailing Address  
3301 NW 22ND TERR  
700 F  
POMPANO BEACH, FL 33069

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

**75-2994791**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BISHOP, JOHN  
5637 PACIFIC BLVD.  
SUITE 2904  
BOCA RATON, FL 33433

7. Name and Address of New Registered Agent

Name **Steve Eason**

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

**3301 NW 22ND TERR**

**700 F**

**Pompano Beach**

**FL**

Zip Code

**33069**

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

*Stephen M Eason*

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

(NOTE: Registered Agent signature required when resigning)

DATE

**5-20-03**

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

| TITLE | NAME            | STREET ADDRESS         | CITY-ST-ZIP             | Delete                              |
|-------|-----------------|------------------------|-------------------------|-------------------------------------|
| CEOD  | BISHOP, JOHN    | 3301 NW 22ND TERR 700F | POMPANO BEACH, FL 33069 | <input type="checkbox"/>            |
| PD    | BAKER, LAWRENCE | 3301 NW 22ND TERR 700F | POMPANO BEACH, FL 33069 | <input type="checkbox"/>            |
| TD    | ZASON, STEVE    | 3301 NW 22ND TERR 700F | POMPANO BEACH, FL 33069 | <input type="checkbox"/>            |
| T     | HEINSLER, DON   | 3301 NW 22ND TERR 700F | POMPANO BEACH, FL 33069 | <input type="checkbox"/>            |
| D     | RICHARDSON, KEN | 3301 NW 22ND TERR 700F | POMPANO BEACH, FL 33069 | <input checked="" type="checkbox"/> |
|       |                 |                        |                         | <input type="checkbox"/>            |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE        | NAME | STREET ADDRESS | CITY-ST-ZIP | Delete                              | Change                   | Addition                 |
|--------------|------|----------------|-------------|-------------------------------------|--------------------------|--------------------------|
| D VP         |      |                |             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|              |      |                |             | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| EASON, STEVE |      |                |             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| S D          |      |                |             | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|              |      |                |             | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
|              |      |                |             | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/> |

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 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:

*Stephen M Eason*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Cayman Phone #

**5-20-03** (954) 410-3869

CR2E034 (10/02)