


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90246 012 ***158.75

DOCUMENT # P02000037055 1. Entity Name PLATINUM MORTGAGE FINANCE GROUP, INC.			
Principal Place of Business 4501 S.W. 25TH TERRACE DANIA BEACH, FL 33312		Mailing Address 4501 S.W. 25TH TERRACE DANIA BEACH, FL 33312	
2. Principal Place of Business <i>3389 Sheridan Street</i> Suite, Apt. #, etc. <i># 129</i> City & State <i>Hollywood, FL</i> Zip <i>33021</i>		3. Mailing Address <i>3389 Sheridan Street</i> Suite, Apt. #, etc. <i>129</i> City & State <i>Hollywood, FL</i> Zip <i>33021</i>	
4. FEI Number <i>02-0572344 65-1122236</i>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		04192004 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent MANLEY, WHITNEY A 4501 S.W. 25TH TERRACE DANIA BEACH, FL 33312		7. Name and Address of New Registered Agent Name <i>Whitney A. Manley</i> Street Address (P.O. Box Number is Not Acceptable) <i>3061 N.W. 211th Street</i> City <i>Miami</i> FL Zip Code <i>33056</i>	
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 <i>Whitney A. Manley</i> <i>Whitney A. Manley / Registered Agent</i> <i>4/27/04</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when terminating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO MANLEY, TEONANTRA P 4501 S.W. 25TH TERRACE DANIA BEACH, FL 33312	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/CEO Manley, Teonatra P. 3061 N.W. 211th Street Miami, FL 33056
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <i>Teonatra P. Manley</i> <i>Teonatra P. Manley</i> <i>4/27/04</i> <i>954-893-8088</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			