

FILED
Jul 14, 2003 8:00 am
Secretary of State

06-09-2003 90108 040 ***150.00
07-14-2003 90344 049 ***400.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000045110

1. Entity Name
PLATINUM PROPERTY HOLDINGS, INC.



Principal Place of Business
1200 BRICKELL AVENUE
SUITE 1440
MIAMI, FL 33131

Mailing Address
1200 BRICKELL AVENUE
SUITE 1440
MIAMI, FL 33131

90142549

2. Principal Place of Business
21050 Point Place
Suite, Apt. #, etc.
2001

3. Mailing Address
20533 Biscayne Blvd
Suite, Apt. #, etc.
127

☐ CHECK HERE IF MAKING CHANGES

City & State
Aventura FL
Zip
33180 Country
US

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Aventura FL
Zip
33180 Country
US

4. FEI Number
06-1696722

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RAMIREZ, MANUEL A
1200 BRICKELL AVENUE
SUITE 1440
MIAMI, FL 33131

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. 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 changing)

DATE

FILED NOW WITH FEES 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME AREVALO, JUAN
STREET ADDRESS
CITY-ST-ZIP 21050 POINT PLACE, APT. 2001
AVENTURA, FL 33178 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME AREVALO, MARIA LUISA
STREET ADDRESS
CITY-ST-ZIP 21050 POINT PLACE, APT. 2001
AVENTURA, FL 33178 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME AREVALO, JUAN CARLOS
STREET ADDRESS
CITY-ST-ZIP 21050 POINT PLACE, APT. 2001
AVENTURA, FL 33178 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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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, without other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/30/2003

(954) 659-8835

Date

Daytime Phone #

CR2034 (10/02)