

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000073811

FILED  
Mar 29, 2005  
Secretary of State

Entity Name: PLATINUM PLUS AUTOMOTIVE, INC.

## Current Principal Place of Business:

3911 EL REY ROAD BAY #1  
ORLANDO, FL 32808

## New Principal Place of Business:

4344 KING EDWARD DRIVE  
ORLANDO, FL 32826

## Current Mailing Address:

3911 EL REY ROAD BAY #1  
ORLANDO, FL 32808

## New Mailing Address:

4344 KING EDWARD DRIVE  
ORLANDO, FL 32826

FEI Number: 05-0514248

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOTEEN, MARK A  
3100 CLAY AVENUE SUITE 177  
ORLANDO, FL 32804 US

## Name and Address of New Registered Agent:

DEFREITAS, LESLIE  
4344 KING EDWARD DRIVE  
ORLANDO, FL 32826 US

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: LESLIE DEFREITAS

03/29/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DEFREITAS, LESLIE  
Address: 4344 KING EDWARD ROAD  
City-St-Zip: ORLANDO, FL 32826

Title: V ( ) Delete  
Name: DAVIS, MYRTLE  
Address: 4344 KING EDWARD ROAD  
City-St-Zip: ORLANDO, FL 32826

Title: ST ( ) Delete  
Name: DEFREITAS, ROBERT  
Address: 4344 KING EDWARD ROAD  
City-St-Zip: ORLANDO, FL 32826

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: DEFREITAS, ROBERT  
Address: 4344 KING EDWARD ROAD  
City-St-Zip: ORLANDO, FL 32826

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LESLIE DEFREITAS

P

03/29/2005

Electronic Signature of Signing Officer or Director

Date