2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2008 08:00 AN Secretary of State

ANNUAL REPORT				May 02, 2008 08:0			
DOCUMENT # P03000072681 1. Entity Name PLATINUM GRAPHICS, INC.					S	ecretary o	of Sta
9912 WATER	ce of Business RMILL CIRCLE #B EACH, FL 33437 US	Mailing Address 9912 WATERMILL CIRCLE #B BOYNTON BEACH, FL 33437	US	1 10 10 3 3	8 (8 8 1011) 6 8 01 (1885 8 801)	88111 18818 NAVA 81491 81181 NGW	10) 10)
DO NOT WRITE IN THIS SPA			CE	04232008 No Chg-P CR2E034 (11/05) 4. FEI Number 42-1598448 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Current R	egistered Agent		1		Fee Required	
COOPER, CASE E 9912 WATERMILL CIRCLE #B BOYNTON BEACH, FL 33437					NOT WI		
the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its register	L ed office or register	ed agent, or both	, in the State of Flori	da. I am familiar with, a	nd accept
SIGNATURE	Signature, typed or printed name of registered agent an	d title d'applicable (NOTE: Registere	d Agant signature required	when reinstating)		DATE	—
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			· —	00 May Be ed to Fees			
10.	OFFICERS AND D	IRECTORS	I	· · · · · · · · · · · · · · · · · · ·			
NAME STREET ADDRESS CITY-ST-ZIP	P/D COOPER, CASE E 9912 WATERMILL CIRCLE #B BOYNTON BEACH, FL 33437				0000000 05/30/08-8)461 6 2 30037-025 158	.75
TITLE NAME STREET ADDRESS CITY-S1-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	ir tor
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN T	HIS SP	ACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						in the distriction of the second of the seco	
NAME STREET ADDRESS							

12. Thereby certify that the information supplied with this filling 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 eath; 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.

Me E.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

4-30-08

Daytime Phone #

Date