# 2005 FOR PROFIT CORPORATION
## ANNUAL REPORT

DOCUMENT # P03000099040

**1. Entity Name**
PLATINUM MANUFACTURING INTERNATIONAL, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 10166 66TH ST. N. | 10166 66TH ST. N. |
| PINELLAS PARK, FL  33782 | PINELLAS PARK, FL  33782 |

## DO NOT WRITE IN THIS SPACE

03212005   No Chg-P   CR2E034 (10/03)

| 4. FEI Number | Applied For |
|---|---|
| 65-1201640 | Not Applicable |

**5. Certificate of Status Desired** ☐   **$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

MILLER, STEVE
10166 66TH ST. N.
PINELLAS PARK, FL  33782

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**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 reinstating)                DATE

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2005 Fee will be $550.00**

**9.** Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

U00000325972
04/23/05-90038-013  150.00

**10.**                     **OFFICERS AND DIRECTORS**

| | |
|---|---|
| TITLE | D |
| NAME | MILLER, STEVE |
| STREET ADDRESS | 10166 66TH ST. N. |
| CITY-ST-ZIP | PINELLAS PARK, FL  33782 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
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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: x _____ Miller _____   4/19/05   727 544-4555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR       Date       Daytime Phone #