

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 06, 2007 8:00 am
Secretary of State

04-20-2007 90207 026 ***150.00

66020757



DOCUMENT # P06000142871																																																																																																																													
1. Entity Name PLATINUM GENERAL CONTRACTOR, CORP																																																																																																																													
Principal Place of Business 4644 SW 75 AVE MIAMI, FL 33155			Mailing Address 4644 SW 75 AVE MIAMI, FL 33155																																																																																																																										
2. Principal Place of Business - No P.O. Box #		3. Mailing Address P.O. Box 771196																																																																																																																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																											
City & State		City & State Miami FL		4. FEI Number 20-5900459																																																																																																																									
Zip		Zip 33177		Country U.S.A																																																																																																																									
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				07252007 Chg-P CR2E034 (12/06)																																																																																																																									
6. Name and Address of Current Registered Agent RODRIGUEZ, ALEJANDRO 13990 SW 159 TERR MIAMI, FL 33177			7. Name and Address of New Registered Agent 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: _____ (NOTE: Registered Agent signature required when renewing) DATE: _____																																																																																																																													
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																																																																																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;">☐ Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 30%; text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>STREET ADDRESS</td> <td>RODRIGUEZ, ALEJANDRO</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>4644 SW 75 AVE MIAMI, FL 33155</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Delete</td> <td>TITLE</td> <td></td> <td style="text-align: right;">☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Addition	STREET ADDRESS	RODRIGUEZ, ALEJANDRO		STREET ADDRESS			CITY-ST-ZIP	4644 SW 75 AVE MIAMI, FL 33155		CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
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12. I hereby certify that the information supplied with this filing 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 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: _____ 9/23/07 (786) 356-3392 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																													

ATTACHMENT

66020757

#P06000142871

Wednesday, July 25, 2007

Attn: Florida Department of State

To whom it concern,

We mailed on January 2007 our annual report; we understand that we had some missing information . We also sent a Check for \$150.00 for each corporation, the check numbers were 2301,2302, 2341 and 2343 for the following corporations;

Platinum General Contractor, Corp

Hevia & Associates P.A

American Awning Supply

Awning of Miami as a DBA Platinum Awning

We are now sending you a copy with all the information that was missing before and the copy of all the checks.

If you have any questions of concerns
please call us.

(305) 261-1220

Sincerely,

Alejandro Rodriguez.



P O BOX 937
GAINESVILLE GA 30503

ATTACHMENT

66020757
#P06000142871

BANK USE ONLY
255 73 73 4311 S

ACCOUNT NUMBER
96-6039-6616

AWNING OF MIAMI, INC DBA PLATINUM AWNIN AW
P.O. BOX 771196
MIAMI FL 33177-0020

CLOSING DATE
05/31/2007

PAGE 5 OF 13

Regions check No. 4 for \$1,280.34 payable to Cash. Signed by [Signature].

No. 4 \$1,280.34

Regions check No. 2328 for \$211.50 payable to Cash. Signed by [Signature].

Regions check No. 2328 for \$211.50 payable to Cash. Signed by [Signature].

No. 2328 \$211.50

Regions check No. 2338 for \$45.53 payable to Cash. Signed by [Signature].

Regions check No. 2338 for \$45.53 payable to Cash. Signed by [Signature].

No. 2338 \$45.53

Regions check No. 2341 for \$150.00 payable to Division of Corporations. Signed by [Signature].

Regions check No. 2341 for \$150.00 payable to Division of Corporations. Signed by [Signature].

No. 2341 \$150.00

Regions check No. 2343 for \$150.00 payable to Division of Corporations. Signed by [Signature].

No. 2343 \$150.00

Regions check No. 2347 for \$360.00 payable to Luis E. DE Armas. Signed by [Signature].

Regions check No. 2347 for \$360.00 payable to Luis E. DE Armas. Signed by [Signature].

No. 2347 \$360.00

Regions check No. 2348 for \$280.00 payable to Luis E. DE Armas. Signed by [Signature].

Regions check No. 2364 for \$256.00 payable to Luis E. DE Armas. Signed by [Signature].

Regions check No. 2364 for \$256.00 payable to Luis E. DE Armas. Signed by [Signature].

No. 2364 \$256.00

Regions check No. 2366 for \$1,714.50 payable to Zadel Rivero. Signed by [Signature].

Regions check No. 2366 for \$1,714.50 payable to Zadel Rivero. Signed by [Signature].

No. 2366 \$1,714.50

Regions check No. 2366 for \$1,714.50 payable to Zadel Rivero. Signed by [Signature].

REGIONS

ATTACHMENT

P O BOX 937
GAINESVILLE GA 30503

66020757
#PO6009142871

BANK USE ONLY
255 114 114 4311

ACCOUNT NUMBER
96-6039-6616

CLOSING DATE
04/30/2007

AWNING OF MIAMI, INC DBA PLATINUM AWNIN AW
P.O. BOX 771196
MIAMI FL 33177-0020

PAGE 16 OF 20

PLATINUM AWNING
4119 NW 120th St
Opa Locka, FL 33054

04/12/07
Division of Corporations
one hundred & fifty
REGIONS
\$150.00

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