FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

TITLE NAME

TITLE NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600053868 (1)

PLATINUM FUNDING CORPORATION, INC.

Principal Plac	e of Business	Mailing Address			n tonstant tin Johan Orier ablit nætti anter beter piten tirat i	IRIIN NIINI IREE INRE
6032 ROYAL BIRKDALE DR LAKE WORTH FL 33467		6032 ROYAL BIRKDALE DR LAKE WORTH FL 33467			DO NOT WRITE IN THIS SPACE	=
					3. Date Incorporated or Qualified	
					06/24/1996	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26			65-0687055	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		m \$8	.75 Additional
22		27	I I		5. Certificate of Status Desired LJ F	ee Required
City & State		City & State				5.00 May Be
23		28			Trust Fund Contribution	dded to Fees
Zip	Country	Zip	├ ─┐	ıntry	8. This corporation owes or has paid the current ye	
24	25	29	30	T	Personal Property Tax due June 30. Yes No	
g, Name and Address of Current Registered Agent				81 Name	10. Name and Address of New Registered Agent	
BENACH, MICHELLE				I I I I I I I I I I I I I I I I I I I		
6032 ROYAL BIRKDALE DR LAKE WORTH FL 33467			82 Street Address (P.O. Box Number is Not Acceptable)			
			83			
			63			
			84 City	FL 85	Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE						
Signature Typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE						
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRE	
TITLE	P	☐ DELET e	1.1 Ti	TLE	□ cr	nange 🔲 Addition
NAME	BENACH, MICHELLE		1.2 N	AME		
STREET ADDRESS			reet address		İ	
CITY-\$T-ZIP	LAKE WORTH FL		1.4 C	TY-ST-ZIP		
TITLE	į V	☐ DELET E	2.1 71	TLE	cr	nange 🔲 Addition
NAME	MARGOLIN, DEBRA C		2.2 N	AME		
STREET ADDRESS			REET ADDRESS			
CITY-ST-ZIP	LAKE WORTH FL		2.40	ITY-ST-ZIP		
TITLE		☐ DELETË	3.1 TI	TLE	☐ Cr	nange 🔲 Addition

6.4 CITY-ST-ZIP

14. Thereby 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

3.3 STREET ADDRESS

3 4. CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

41 TITLE

4 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 THILE

6.2 NAME

DELETE

DELETE

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7-11 95

Change

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Addition

Addition

Addition

FILED

Feb 17 1998 8:00am

Secretary of State

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