

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000043591 (1)
1. Corporation Name
PLATINIUM ENTERPRISES, INC.

Principal Place of Business

Mailing Address

5908-10 HALLANDALE BEACH BLVD
HALLANDALE FL 33023

5908-10 HALLANDALE BEACH BLVD
HALLANDALE FL 33023

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

5-16-1997

4. FEI Number

65-0758157

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MEGHANI, TAJUDDIN R
5908-10 HALLANDALE BEACH BLVD
HALLANDALE FL

81 Name

MEGHANI, NURUDDIN T.

82 Street Address (P.O. Box Number is Not Acceptable)

83 5908-10 HALLANDALE BEACH BLVD

84 City HALLANDALE

FL

85 Zip Code
33023

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

Nuruddin Meghani

NURUDDIN T. MEGHANI, PRESIDENT

2-10-99

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

☒ DELETE

NAME

MEGHANI, TAJUDDIN R

STREET ADDRESS

1760 S GLADES DR, UNIT 4

CITY-ST-ZIP

MIAMI FL 33162

TITLE

☐ DELETE

NAME

MEGHANI, NURUDDIN T

STREET ADDRESS

1760 S GLADES DR, UNIT 4

CITY-ST-ZIP

MIAMI FL 33162

TITLE

☐ DELETE

NAME

RAMZANALI, SAKINA T

STREET ADDRESS

1760 S GLADES DR, UNIT 4

CITY-ST-ZIP

MIAMI FL 33162

TITLE

☒ DELETE

NAME

MEGHANI, BOLATKHANU T

STREET ADDRESS

1760 S GLADES DR, UNIT 4

CITY-ST-ZIP

MIAMI FL 33162

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

PD MEGHANI, NURUDDIN T.
5908-10 HALLANDALE BEACH BLVD
HALLANDALE, FL 33023

YD RAMZANALI, SAKINA T.
5908-10 HALLANDALE BEACH BLVD
HALLANDALE FL 33023

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****150.00 ****150.00

14. 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 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, with all other like empowered

SIGNATURE: *Nuruddin Meghani* NURUDDIN T. MEGHANI 2-10-99 954-962-2752
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #