
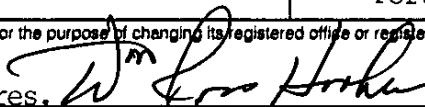
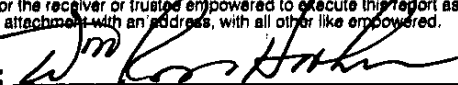


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2005 8:00 am
Secretary of State

03-03-2005 90176 040 ***150.00

DOCUMENT # P97000079718					
1. Entity Name PLATINUM CONTRACTING, INC.					
Principal Place of Business 5610 DIVISION DRIVE FORT MYERS, FL 33905		Mailing Address 5610 DIVISION DRIVE FORT MYERS, FL 33905			
2. Principal Place of Business 12995 S. Cleveland Ave. Suite, Apt. #, etc. Suite 9		3. Mailing Address 12995 S. Cleveland Ave. Suite, Apt. #, etc. Suite 9			
City & State Fort Myers, Fl.		City & State Fort Myers, Fl.		4. FEI Number 65-0781928	
Zip 33907		Country USA		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent HOOKER, W. ROSS 5610 DIVISION DRIVE FORT MYERS, FL 33905			7. Name and Address of New Registered Agent		
			Name Hooker, W. Ross		
			Street Address (P.O. Box Number is Not Acceptable) 12995 S. Cleveland Ave. Suite 9		
			City Fort Myers		
			FL Zip Code 33907		
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 <u>W. Ross Hooker, Pres.</u> 				DATE 3/1/05	
Signature, typed or printed name of registered agent and title if applicable.				(NOTE: Registered Agent signature required when reinstating)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$530.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	Hooker, W. Ross	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOOKER, W. ROSS		NAME	Hooker, W. Ross	
STREET ADDRESS	5610 DIVISION DRIVE		STREET ADDRESS	12995 S. Cleveland Ave., Suite 9	
CITY - ST - ZIP	FORT MYERS, FL 33905		CITY - ST - ZIP	Fort Myers, Fl. 33907	
TITLE	D	<input type="checkbox"/> Delete	TITLE	Reyff, Mary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REYFF, MARY		NAME	Reyff, Mary	
STREET ADDRESS	5610 DIVISION DRIVE		STREET ADDRESS	12995 S. Cleveland Ave., Suite 9	
CITY - ST - ZIP	FORT MYERS, FL 33905		CITY - ST - ZIP	Fort Myers, Fl. 33907	
TITLE		<input type="checkbox"/> Delete	TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Pandora Hooker	
STREET ADDRESS			STREET ADDRESS	12995 S. Cleveland Ave., Suite 9	
CITY - ST - ZIP			CITY - ST - ZIP	Fort Myers, Florida 33907	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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: 			W. Ross Hooker, Pres. 3/1/05 239-693-6447		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		