

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 12, 2001 8:00 am**  
**Secretary of State**

03-12-2001 90384 027 \*\*\*150.00

DOCUMENT # P99000074939

1. Entity Name

Platinum Limousines of South Florida, Inc.

Principal Place of Business

1050 SW 46 Ave. #206  
 Pompano Beach, Fla. 33069

Mailing Address

1050 SW 46 Ave. #206  
 Pompano Beach, Fla.  
 33069

2. Principal Place of Business

1291 SW 26 Ave

3. Mailing Address

1291 SW 26 Ave

Suite, Apt. #, etc.

Suite #110

Suite, Apt. #, etc.

Suite #110

City & State

Pompano Beach, Fla.

City & State

Pompano Beach, Fla.

4. FEI Number

650944047

Applied For

Not Applicable

Zip

33069

Country

USA

Zip

33069

Country

USA

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

DO NOT WRITE IN THIS SPACE

A0031025

6. Name and Address of Current Registered Agent

Herman, Bruce  
 1401 E. Broward Blvd. #104  
 Pompano Beach, Florida 33069

7. Name and Address of New Registered Agent

Name  
 Herman, Bruce  
 Street Address (P.O. Box Number is Not Acceptable)  
 1401 E. Broward Blvd. #206  
 City  
 Fort Lauderdale FL Zip Code  
 33301

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**

**After MAY 1, 2001 Fee will be \$550.00**

**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Director  
 HoPherr, Jan  
 1030 SW 46 Ave #104  
 Pompano Beach, FL. 33069 ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Director  
 Schwartz, Charles  
 1030 SW 46 Ave #104  
 Pompano Beach, FL. 33069 ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 Director  
 Schwartz, Charles  
 1291 SW 26 Ave #110  
 E. Pompano Beach, Fla. 33069 ☒ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles Schwartz

3/2/01

Date

954-785-4030

Daytime Phone #

CR2E034 (11/00)