


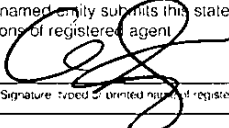
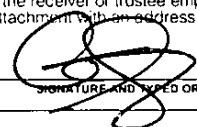
2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90372 022 ***150.00

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DOCUMENT # P99000074939					
1. Entity Name PLATINUM LIMOUSINES OF SOUTH FLORIDA, INC.					
Principal Place of Business 1751 S DIXIE HWY UNITS 1-4 & 42-44 POMPANO BEACH, FL 33060			Mailing Address 2810 NE 9TH COURT POMPANO BEACH, FL 33062		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number 65-0944047				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 SCHWARTZ, CHARLES 1201 SW 26TH AVE STE 110 POMPANO BEACH, FL 33069			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2810 NE 9TH CT City Pompano Beach FL Zip Code 33062		
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 re-registering) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		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	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHWARTZ, CHARLES		NAME	2810 NE 9TH CT	
STREET ADDRESS	1201 SW 26TH AVENUE #110		STREET ADDRESS	Pompano Beach FL 33062	
CITY - ST - ZIP	POMPANO BEACH, FL 33069		CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	Schwartz, C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWARTZ, CYNTHIA		NAME	" "	
STREET ADDRESS	1201 SW 26TH AVE. SUITE# 110		STREET ADDRESS	" "	
CITY - ST - ZIP	POMPANO BEACH, FL 33069		CITY - ST - ZIP	" "	
TITLE	O	<input type="checkbox"/> Delete	TITLE	" "	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWARTZ, C		NAME	" "	
STREET ADDRESS	1201 SW 26TH AVE SUITE# 110		STREET ADDRESS	" "	
CITY - ST - ZIP	POMPANO BCH, FL 33069		CITY - ST - ZIP	" "	
TITLE	O	<input type="checkbox"/> Delete	TITLE	" "	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWARTZ, C		NAME	" "	
STREET ADDRESS	1201 SW 26TH AVE. SUITE#110		STREET ADDRESS	" "	
CITY - ST - ZIP	POMPANO BEACH, FL 33069		CITY - ST - ZIP	" "	
TITLE	O	<input type="checkbox"/> Delete	TITLE	" "	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWARTZ, C		NAME	" "	
STREET ADDRESS	1201 SW 26TH AVE. SUITE#110		STREET ADDRESS	" "	
CITY - ST - ZIP	POMPANO BEACH, FL 33069		CITY - ST - ZIP	" "	
TITLE	O	<input type="checkbox"/> Delete	TITLE	" "	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWARTZ, C		NAME	" "	
STREET ADDRESS	1201 SW 26TH AVE SUITE#110		STREET ADDRESS	" "	
CITY - ST - ZIP	POMPANO BEACH, FL 33069		CITY - ST - ZIP	" "	
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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #					