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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # S31700 1. Corporation Name

(5)

PLATINUM GROUP ASSOCIATES, INC.

	F	ILED	
May	13	1997	8:00am
Sec	ret	ary of	State

Principal Pa	al Piace of Business Mailing Address					f namelyang con street regit sharet marit make diber dense dense dense dense betate and				
1897 PALM BCH LKS BLVD 1897 PALM BCH LK			.KS BLVD							
STE 125		STE 125								
W PALM BE	ACH FL 33409	W PALM BEACH FL	33406-3508			3. Date Incorporated or Qualified	Se Do	te of Last R	lanort	
						02/12/1991		02/1996		
	Place of Business	2a. Mailing Address	3			4. FEI Number		p	opli <b>ed</b> For	
21		26				65-0345677			ot Applicable	
Suite, Ap 22	ot. #, etc	Suite, Apt. #, etc	c.			5. Certificate of Status Desired	12		Additional equired	
City & St	tate	City & State	<del></del>			6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution			to Fees	
Zip	Country	Zip	Co	untry	<del>,</del>	8. This corporation has liability for	intangible	tax under s	. 199.032	
24	25	29	30			Florida Statutes	Yes [	.] No		
	9. Name and Address of Cu	ırrent Registered Agent				10. Name and Address of New Re	gistered /	igent		
C	Oughanour, Frank			81	Name					
18	897 PALM BEACH LAKES BLVI	D.		82	Street Ad	dress (P.O. Box Number is Not Acceptal	vie)			
#	125			"	Street Au	diess (1 .o. dox Humber is Not Acceptat	, , , , , , , , , , , , , , , , , , ,			
W	PALM BEACH FL 33409			83	· · · · · · · · · · · · · · · · · · ·					
				<u></u>	00			1-1 -	A. d.	
				84	City		FL	<b>85</b> Zip	Code	
SIGNATUR	Sugnative: *ypind or printed name of register	ad agent and title If applicable.	(NOTE Flegislere	во Аре	ent signature rec	quired when reinstaling)	DAYE			
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS AND	DIRECTOR	IS IN 12	
TITLE	P	DELET	E 1,1 T	TILE				☐ Change	Additio	
NAME	CONGHONOUR, FRANK		1.2 %	IAME						
STREET ADDRES		25	1.3 \$	TREET	ADDRESS					
CITY - ST - 7IP	WEST PALM BEACH FL		1,4 (	ity-s	ST-21P					
TITLE		☐ DELET	E 2.1 I	ITLE				Change	Additio	
NAME	FRANKLIN, ROGER	_	2.2 1	IAME		Gamblin, Roger				
STREET ADORES		5	2.3 9	TREET	ADDRESS					
CITY-S1-ZIP	WEST PALM BEACH FL			CITY-!	ST-ZIP					
TITLE		☐ DELET	E 3.1 1	ITLE				Change	Additio	
NAME			3.2 h	MAME	ł					
STREET ADDRES	s		3.3 9	STAEET	ADDRESS					
CITY - S1 - 7IP				CITY-	ST~ZIP					
TITLE		DELET	E 4.1 1	ITLE				Change	Additio	
NAME			4. 2	NAME						
STREET ADORES	8		4.3 9	STAEET	ADDRESS					
CITY-S1-ZIP				CITY-S	ST-ZIP .			·		
THLE		DELET	E 5.1 T	TITLE				Change	Additio	
NAM?			5.2 1	IAME						
STREET ADDRES	8		5.3 8	STAEET	ADDRESS					
CHTY - ST - ZIP				STY-S	51 - ZIP				-	
TILLE		☐ DELET	E 617	TITLE				Change	Addition Addition	
NAME			621	NAME						
STREET ADDRES	ŝ		6.3 \$	STREET	AODRESS					
Dity-St-7iP			6.4 0	S-YTE	ST-21P					
	returned that the information our	onlind with this filling dose not				ed in Section 119 07(3)(i). Florida Statute	e further	certify that	the	

I. I do 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 disporation 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 phanged, or on an attainment with an address.

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

04/30/97

561-686-7611 Daylime Phone #