



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2010

1. Corporate ID No. 000111652

2. Name of Corporation Platinum Recovery Solutions, Inc.

3. Street Address Principal Business Office:

No. and Street: 14010 FNB PARKWAY, 5TH FLOOR

City or Town: OMAHA

State: NE Zip: 68154-5206 Country: USA

4. Business Phone No.

402 964 8300

5. State of Incorporation

State: NE

6. Brief Description of the Character of Business Conducted in Rhode Island

OPERATION OF A COLLECTION AGENCY

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	KEVIN SHANNO	14010 FNB PARKWAY OMAHA, NE 68154 USA
SECRETARY	JAY REED	14010 FNB PARKWAY OMAHA, NE 68154 USA
TAX OFFICER	SARA L RATHJEN	1620 DODGE STREET OMAHA, NE 68197 USA
PRESIDENT	JOHN A OSTROWSKI	14010 FNB PARKWAY, 5TH FLOOR OMAHA, NE 68154-5206 USA
ASSISTANT SECRETARY	MAUREEN OCONNOR	1620 DODGE STREET OMAHA, NE 68197 USA
DIRECTOR	MICHAEL SUMMERS	1620 DODGE STREET OMAHA, NE 68197 USA
DIRECTOR	JOSEPH BARRY	1620 DODGE STREET OMAHA, NE 68197 USA
DIRECTOR	JOHN LANGENFELD	1620 DODGE STREET OMAHA, NE 68197 USA
DIRECTOR	JOHN A OSTROWSKI	14010 FNB PARKWAY OMAHA, NE 68154 USA
DIRECTOR	PAUL D GARCIA	14010 FNB PARKWAY OMAHA, NE 68154 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$1.00	10,000.00	10000

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 9 Day of February, 2010 at 8:28:22 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By SARA L RATHJEN
Signature of Authorized Representative of the Corporation

TAX OFFICER
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07

© 2007 - 2010 State of Rhode Island and Providence Plantations
All Rights Reserved