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1995 FEB -6 PM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathart
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 188569 (8)
1. Corporation Name
PIONEER METALS INC.

Principal Place of Business Mailing Address
3611 NW 74TH ST MIAMI FL 33147

2. Principal Place of Business 2a. Mailing Address

21 26

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

23 City & State 28 City & State

24 Zip 25 Country 29 Zip 30 Country

3. Date Incorporated or Qualified 3a. Date of Last Report
10/24/1955 03/24/1994

4. FEI Number Applied For
59-0773846 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HEGAMYER, WILLIAM H
511 N. MASHTA DRIVE
KEY BISCAYNE FL**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code **33149**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent Signature required when registering) DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE CP
NAME HEGAMYER, W H
STREET ADDRESS 511 N. MASHTA DRIVE
CITY-ST-ZIP KEY BISCAYNE FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP **ZIP 33149**

TITLE VD
NAME HEGAMYER, L K
STREET ADDRESS 511 N. MASHTA DRIVE
CITY-ST-ZIP KEY BISCAYNE FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP **ZIP 33149**

TITLE T
NAME ROBINSON, CHARLES V
STREET ADDRESS 1550 NE 123 ST, N-307
CITY-ST-ZIP N MIAMI FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP **ZIP 33161**

TITLE SD
NAME HEGAMYER, K L
STREET ADDRESS 261 GREENWOOD DR
CITY-ST-ZIP KEY BISCAYNE FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP **ZIP 33149**

TITLE VD
NAME MARTY, D C
STREET ADDRESS 7850 SW 67 TERRACE
CITY-ST-ZIP MIAMI FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP **ZIP 33143**

TITLE VD
NAME HINCKLEY, H D
STREET ADDRESS 6065 ROLLING RD DR.
CITY-ST-ZIP MIAMI FL

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP **ZIP 33156**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **William H. Hegamyer** *[Signature]* 1/12/95 (305) 696-0830
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR