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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90078 032 \*\*\*150.00

## DOCUMENT # 380156

PIONEER HOLDING, INC.

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	ON FL 34203			ONECO FL 34264 US				-	3. Date Incorporated or Qualifed			
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	!	<u> </u>	- la-	Maritime Address					4. FEI Number		pplied For	1
<del></del> 1	2. Principal Place of Business			a. Mailing Address							ot Applicable	┤╼╴
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22 Suite,	Suite, Apt. #, etc.			Suite, Apr. #, sic.				\	5. Certificate of Status Desired		equired	
	State			City & State				T	6. Election Campaign Financing	\$5.00	May Be	ĺ
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Zip		Country		Zip		Countr	у		8. This corporation owes the current year Inta		_	]
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	9. N	ame and Address of Currer	nt Regis	stered Agent					10. Name and Address of New Registered A	\gent_		4
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	Pinto, Hai 2930 48TH					82	Street Ad	dress	s (P.O. Box Number is Not Acceptable)			1
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offici	e or registere	d agent, or both, in the State	of Flori	da. Such change	e was auth	orized by	/ the corpora	rpora	ation submits this statement for the purpose of c s board of directors. I hereby accept the appoin	changing its tment as re	registered egistered	
ager	nt. I am famili	ar with, and accept the obliga	ations of	f, Section 607.05	505, Florida	a Statute	S.					
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SIGNAT	URE		4 222			_	at since bus man	ilra d u à	DATE		<del></del>	
	URE Signature	typed or printed name of registered age		if applicable.		gistered Age	ent signature requ	ired wh		D DIRECTO	ORS IN 12	- 6
12.	Signature	typed or printed name of registered age OFFICERS AN		if applicable.	(NOTE: Re	gistered Age	ent signature requ	uired wh	nen reinstating) DATE ADDITIONS/CHANGES TO OFFICERS ANI	D DIRECTO	ORS IN 12	100,11
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6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE

TITLE

NAME

STREET ADDRESS

DELETE

(941) 756-2508 Daytime Phone #

☐ Change

☐ Addition

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W.