FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Apr 18, 2001 8:00 am Secretary of State **DOCUMENT # 239400** 1. Entity Name PIONEER METAL OF JACKSONVILLE, INC. 04-18-2001 90081 001 *3.450.00 Principal Place of Business Mailing Address 601 N MYRTLE AVE 6501 NW 37TH AVE JACKSONVILLE FL 32204 MIAMI FL 33147-5827 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1667765 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD. PLANTATION FL 33324 City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Delete TITLE TITLE NAME GOODMAN, JOHN NAME STREET ADDRESS STREET ADDRESS 1501 SEAMIST CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77008** Delete TITLE □ Change TITLE NAME WINNINGHAM, GARLAND NAME David Parks STREET ADDRESS , STREET ADDRESS 1501 SEAMIST 1501 Seamist CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77008** Houston_Tx.77008. X Delete TITLE TITLE VS NAME DOMBROWSKI, PAUL NAME Ben Campbell STREET ADDRESS STREET ADDRESS 1501 SEAMIST 1501 Seamist CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77008** Houston, Tx 77008 TITLE ☐ Delete TITLE ☐ Addition NAME KLEPSER, TANIA NAME STREET ADDRESS STREET ADDRESS 1501 SEAMIST CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77008** Change TITLE ☐ Delete TITLE Addition NAME MARTY, D.C. NAME STREET ADDRESS STREET ADDRESS 7845 SW 67TH TERRACE CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33143 ☐ Delete ` ☐ Addition TITLE TITLE Change NAME HINCKLEY, H D NAME STREET ADDRESS 6065 ROLUN RD DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33156 13. I hereby certify that the information st indicated on this report or supplement Unplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information high eport 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 truther empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if my address, with all other like empowered.

of the corporation of the receiver of truffee empowered to execute this report as required by changed, or on an attachment with an adoress, with all other like empowered.

SIGNATURE:

VP CPERATIONS

A TOURS

TO STATE OF THE PROPERATIONS

TO STATE

D Hinckley

4/3/01

305-696-083

Daytime Phone #