

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

1995 FEB -6 PM 1:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 239401

(3)

1. Corporation Name

PIONEER METALS OF MELBOURNE, INC.

Principal Place of Business

7610 ELLIS ROAD
W MELBOURNE FL 32904
US

Mailing Address

3611 NW 74TH ST
MIAMI FL 33147-5827
US

700001401307

-02/09/95--01068--001

DO *****00 SP*****200.00

3. Date Incorporated or Qualified

08/12/1960

3a. Date of Last Report

03/24/1994

4. FEI Number

59-1769220

Applied For

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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

Signature, typed or printed name of registered agent and title if applicable

(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

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

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

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

ZIP 33161

TITLE SD
NAME HEGAMYER, K L
STREET ADDRESS 281 GREENWOOD DR
CITY- ST- ZIP KEY BISCAYNE FL

4.1 TITLE

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

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

ZIP 33143

TITLE VD
NAME HINCKLEY, H D
STREET ADDRESS 6085 ROLLING RD DR
CITY- ST- ZIP MIAMI FL

6.1 TITLE

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/95

(305) 696-0830