

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

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 550694 (4)

1. Corporation Name
PIONEER FRUIT CO., INC.

Principal Place of Business
2642 FLAMINGO LANE
FT LAUDERDALE FL 33312
US

Mailing Address
2642 FLAMINGO LANE
FT LAUDERDALE FL 33312
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/03/1977	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1775823	
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

SEIFERT, LEON R
2642 FLAMINGO LANE
FT LAUDERDALE FL 33312

10. Name and Address of New Registered Agent

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

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 reinstating)

DATE

OFFICERS AND DIRECTORS

12.	TITLE	PD	SEIFERT, LEON R.	<input type="checkbox"/> DELETE
	NAME		2642 FLAMINGO LANE	
	STREET ADDRESS		FT LAUDERDALE FL	
	CITY - ST - ZIP			
	TITLE	STD	SAPP, MARJORIE H	<input type="checkbox"/> DELETE
	NAME		2642 FLAMINGO LANE	
	STREET ADDRESS		FT. LAUDERDALE FL	
	CITY - ST - ZIP			
	TITLE	VD	DEINEMA, JULIE	<input type="checkbox"/> DELETE
	NAME		2642 FLAMINGO LANE	
	STREET ADDRESS		FT. LAUDERDALE FL	
	CITY - ST - ZIP			
	TITLE			<input type="checkbox"/> DELETE
	NAME			
	STREET ADDRESS			
	CITY - ST - ZIP			
	TITLE			<input type="checkbox"/> DELETE
	NAME			
	STREET ADDRESS			
	CITY - ST - ZIP			

13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2	NAME	
1.3	STREET ADDRESS	
1.4	CITY - ST - ZIP	
2.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2	NAME	
2.3	STREET ADDRESS	
2.4	CITY - ST - ZIP	
3.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2	NAME	
3.3	STREET ADDRESS	
3.4	CITY - ST - ZIP	
4.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2	NAME	
4.3	STREET ADDRESS	
4.4	CITY - ST - ZIP	
5.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2	NAME	
5.3	STREET ADDRESS	
5.4	CITY - ST - ZIP	
6.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2	NAME	
6.3	STREET ADDRESS	
6.4	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.

SIGNATURE: LEON R SEIFERT Leon R Seifert Pres April 3 1998 305-6240821

CR2E034 (10/97)