

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000002537

1. Entity Name

PIONEER NEW MEDIA TECHNOLOGIES, INC.

**FILED**  
May 16, 2001 8:00 am  
Secretary of State

05-16-2001 90260 001 \*\*\*150.00

Principal Place of Business

Mailing Address

2265 EAST 220TH STREET  
LONG BEACH CA 90810

2265 EAST 220TH STREET  
LONG BEACH CA 90810

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 31-1030334

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

Name

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

City

FL

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

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME DEMPSEY, PAUL  
STREET ADDRESS 2265 EAST 220TH STREET  
CITY-ST-ZIP LONG BEACH CA 90810 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE V  
NAME TAKAHASHI, TATSUO  
STREET ADDRESS 2265 EAST 220TH STREET  
CITY-ST-ZIP LONG BEACH CA 90810 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ST  
NAME MARUKAWA, KUNIO  
STREET ADDRESS 2265 EAST 220TH STREET  
CITY-ST-ZIP LONG BEACH CA 90810 ☒ Delete

TITLE ST  
NAME SHIGERU HAYASHI  
STREET ADDRESS 2265 E. 220TH STREET  
CITY-ST-ZIP LONG BEACH, CA 90810 ☐ Change ☒ Addition

TITLE D  
NAME AIBA, HOROSHI  
STREET ADDRESS 2265 EAST 220TH STREET  
CITY-ST-ZIP LONG BEACH CA 90810 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D  
NAME YAMAMOTO, KAZUNORI  
STREET ADDRESS 2265 EAST 220TH STREET  
CITY-ST-ZIP LONG BEACH CA 90810 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE ASST SECRETARY  
NAME ROBERT J. GLOSS  
STREET ADDRESS 2265 E. 220TH STREET  
CITY-ST-ZIP LONG BEACH, CA 90810 ☐ Change ☒ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-29-01 310 952-2114

CR2E034 (10/00)