

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 27, 2003 8:00 am**  
**Secretary of State**

01-27-2003 90320 007 \*\*\*150.00

**DOCUMENT # F11568**

1. Entity Name  
**P. M. I. INTERNATIONAL DISC, INC.**



Principal Place of Business  
**6501 NW 37TH AVE  
MIAMI FL 33147  
US**

Mailing Address  
**6501 NW 37TH AVE  
MIAMI FL 33147  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2051737**

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
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. I am familiar with, and accept the obligations of registered agent.

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**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **CD**  
STREET ADDRESS **GOODMAN, JOHN**  
CITY-ST-ZIP **2550 NORTH LOOP WEST, SUITE 400  
HOUSTON TX 77092**

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

TITLE ☐ Delete  
NAME **V**  
STREET ADDRESS **BLACKBURN, LAWRENCE M**  
CITY-ST-ZIP **2550 NORTH LOOP WEST, SUITE 400  
HOUSTON TX 77092**

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

TITLE ☐ Delete  
NAME **VS**  
STREET ADDRESS **CAMPBELL, BEN**  
CITY-ST-ZIP **2250 NORTH LOOP WEST, SUITE 400  
HOUSTON TX 77092**

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

TITLE ☐ Delete  
NAME **T**  
STREET ADDRESS **KLEPSE, TANIA**  
CITY-ST-ZIP **2550 NORTH LOOP WEST, SUITE 400  
HOUSTON TX 77092**

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

TITLE ☐ Delete  
NAME **P**  
STREET ADDRESS **MARTY, D C**  
CITY-ST-ZIP **2550 NORTH LOOP WEST, SUITE 400  
HOUSTON TX 77092**

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

TITLE ☐ Delete  
NAME **V**  
STREET ADDRESS **HINCKLEY, H D**  
CITY-ST-ZIP **6065 ROLLING DR  
MIAMI FL 33156**

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**HINCKLEY, H D**  
**OPERATIONS**  
**1/21/2003 3056960830**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

Date

Daytime Phone #

CR2E034 (10/02)

*Attachment*  
*F11568*  
*30022494*

Attachment to 2003 Uniform Business Report  
Pioneer Metals, Inc.

D

Meg Goodman  
2550 North Loop West, suite 400  
Houston, Tx 77092

D

Betsey G. Abell  
2550 North Loop West, suite 400  
Houston, Tx 77092

D

G. Hughes Abell  
2550 North Loop West, suite 400  
Houston, Tx 77092

D

Charles A. Carroll  
2550 North Loop West, suite 400  
Houston, Tx 77092

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