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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



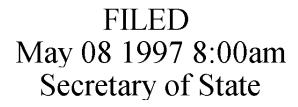
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F89142
1. Corporation Name
PIONEER SCREEN, INC.

(6)





Principal Plac	e of Business	Mailing Address					
8121 GE WAALER STREET STUART FL 34997		3121 SE WAALER STI STUART FL 34997-592					
19.4 - 1 <b>99.</b> .					Date Incorporated or Qualified     06/30/1982	3a. Date of Last Report 01/22/1996	
2. Principal P	Place of Business	2a. Mailing Address			4. FE! Number	1 7 1,1-0,	Applied For
21 26			J.		59-2203661		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc		······································	SR 75 Additional		
22		27			5. Certificate of Status Desired	<u></u> Ψ	Fee Required
City & State	Θ	City & State		***************************************	6. Election Campaign Financing		\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees	
Zip	Country	Country 7ip Country		··-··	8. This corporation has liability for in		
24	25	29	30		Florida Statutes		
	9. Name and Address of Cur	rrent Registered Agent			10. Name and Address of New Reg	Istered Age	nt
~ <del>521</del> (	E, CRAIG <del>3 S.E. Harbor Terr</del> . <i>C</i> ( IART FL 34997	on swoidt	Kansas <sup>1</sup> 83 84	Olicel rice	fress (P.O. Box Number is Not Acceptable	e) F1 <sup>8</sup>	5 Zıp Code
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, it am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or philated name of required agent, and their applicable (NOTE: Itegistered Agent signature required when relistating)  DATE							
12.	OFFICERS	AND DIRECTORS	18.		ADDITIONS/CHANGES TO OFFICE		SECTORS IN 12
TALE	P	DELETE	1,1 TOLE			Į.	Change Addition
NAME	RICE, CRAIG		1.2 NAME	0	ion swold Kans Stuart, 172 349	as A	Xe
STREET ADDRESS	5213 SE HARBOR TERR		1.3 STREE	ADDRESS (	Stropt IT aug	00	·
CITY-ST-ZIP	STUART FL		1.4 CHY- 5	ST-ZIP	314461, 1 6 349	91	:
TITLE		☐ DELETE	2.1 TITLE				Change Addition
NAME			2.2 NAM(				
STREET ADDRESS			2.3 STREE	ADDRESS			
CITY-ST-ZIP			2.4 CITY-	ST-ZIP			
TITLE		DELETE			The state of the s		Change Addition
NAME			3.2 NAM[				
STREET ADDRESS			3.3 STHELL	ADDRESS	Y.		
CITY-ST-ZIP	İ		3.4. CiTY-	SI-ZIP			
TITLE		DELETE					Change Addition
NAME -			4. 2 NAM(				· —
STREET ADDRESS			43 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY - 5	1			
TITLE		DETETE		21 231			Change Addition
NAME			52 NAME			L.,J	g
STREET ADDRESS			5.3 \$1REE	ADDRESS			
CITY-ST-ZIP							
TITLE		DELETE	5.4 C/TY - 5 6.1 TH LE	ot - ZII'			Change Addition
NAME						L	Gridings [] Appriloff
			6.2 NAME	Inno.			
STREET ADDRESS	,		6.3 STREET				
CITY-ST-ZIP			6.4 CITY - S	ST - 71P			

do 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 chapted, or on an attachment with an address.