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FILED
Mar 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # L47624 (6)

1. Corporation Name
PIONEER METALS OF OCALA, INC.

Principal Place of Business

655 SW 15TH ST
OCALA FL 34474
US

Mailing Address

3611 NW 74TH ST
MIAMI FL 33147-5827
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/06/1990

4. FEI Number

65-0317180

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 1426 NE 8th Avenue

Suite, Apt. #, etc.

22 City & State

23 Ocala, FL

Zip

24 34470

Country

25 USA

2a. Mailing Address

26 6501 NW 37th Ave.

Suite, Apt. #, etc.

27 City & State

28 Miami, FL

Zip

29 33167

Country

30 USA

9. Name and Address of Current Registered Agent

HEGAMYER, WILLIAM H.
511 NORTH MASHTA DRIVE
KEY BISCAYNE FL 33149

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip 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. 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

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME CP
HEGAMYER, WILLIAM H.
STREET ADDRESS 511 N. MASHTA DRIVE
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE ☐ DELETE

NAME VD
HEGAMYER, LEONORA K.
STREET ADDRESS 511 N. MASHTA DRIVE
CITY-ST-ZIP KEY BISCAYNE FL 33149

TITLE ☐ DELETE

NAME VD
MARTY, DOUGLAS C
STREET ADDRESS 7845 SW 67TH TERRACE
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME VD
HINCKLEY, HARRY D. JR
STREET ADDRESS 6065 ROLLING RD DR
CITY-ST-ZIP MIAMI FL 33156

TITLE ☐ DELETE

NAME T
ROBINSON, CHARLES V
STREET ADDRESS 7845 SW 67TH TERRACE
CITY-ST-ZIP N MIAMI FL

TITLE ☐ DELETE

NAME SD
HEGAMYER, K L
STREET ADDRESS 261 GREENWOOD DR
CITY-ST-ZIP KEY BISCAYNE FL 33149

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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

Kathy Heganmyer

Kathy Heganmyer

4/8/98

205-191 0820

CR2E034 (10/97)