2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M03480

1. Entity Name

PIONEER METALS OF FT. PIERCE, INC.



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

01-27-2003 90313 005 ***150.00

Suito, Apt. #, otc. Cay & State Cay & Cay & State Cay & Cay & Cay & State Cay & Ca	Principal Place of Business 900 FARMERS MARKET ROAD FT PIERCE FL 34982 US		Mailing Address 6501 NW 37TH AVE MIAMI FL 33147-5827 US								
City & State	2. Principal Place of Business		3. Mailing Address				î 1000:0410	81811 2161	OLOU BILLI DI	IBNI BIBIT IBBT	
Special Country Zip Country S. Certificate of Status Cease S8.75 Addisonal See Required Agent S. Certificate of Status Cease S8.75 Addisonal Fee Required Agent S. Certificate of Status Cease S8.75 Addisonal Fee Required Agent S. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable)	Suite, Apt	#, etc.	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 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, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent and the # aparticute. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN IT THE OGODIMAN, JOHN GOODMAN, JOHN GOODMAN GOODMAN	City & Sta	te	City & State			4.	4. FEI Number 59-2430311 Applied For Not Applicable				
CT CORPORATION SYSTEM 1260 S. PINE ISLAND RD. PLANTATION FL 33324 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Forida. I am familiar with, and acceptable) FLE NOW!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE OGOODMAN, JOHN SIREST ADDRESS OFFI-ST-2P TILE V BACKBURN, LAWRENCE M SIREST ADDRESS OFFI-ST-2P TILE NAME SIREST ADDRESS OFFI-ST-2P TILE V MARTY, DOUGLAS C. SIREST ADDRESS OFFI-ST-2P TILE V MARK SIREST ADDRESS OFFI-ST-2P TILE V MARK ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TIRE V MARK SIREST ADDRESS OFFI-ST-2P TILE V MARK SIREST ADDRESS OFFI-ST-2P TILE V MARK MARK MARK SIREST ADDRESS OFFI-ST-2P TILE V MARK MARK MARK MARK SIREST ADDRESS OFFI-ST-2P TILE V MARK MARK MARK MARK MARK SIREST ADDRESS OFFI-ST-2P TILE V MARK MARK MARK MARK MARK MARK MARK MARK	Zip	Country	Zip Country			5.					
CT CORPORATION SYSTEM 1260 S. PINE ISLAND RD. PLANTATION FL 33324 City FL Zip Code	.8	6. Name and Address of Current R	egistered Agent								
Street Address (P.O. Box Number is Not Acceptable)	•				Name						
1280 S. PINE ISLAND RD.			Street Address			ess (P.O. F	(P.O. Box Number is Not Acceptable)				
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, hypec or privisor name of registered agent and late if applicable. (NOTE Registered Agent signature required when reinstating) DAIE			Glicel Address								
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printer name of implicated agent and lite if applicable. (NOTE: Registered Agent signature required when reintatating) DATE	PLANTATI	ON FL 33324									
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00		← ,,		City			· · ·	FL	Zip Cod	e	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10.	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										
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10.		Signature, typed or primed marine of registered agent and	o title ii applicable. (NOTE	:: negisierec	Agent signature rec	quirea when re	einstating) .	DAIL			
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	NAME STREET ADDRESS	CAMPBELL, BEN 2550 NORTH LOOP WEST, SUITE		NAME STREE	T ADDRESS		-] Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information shellow that the information indicated on this report or supplied with this filling 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 supplied intal 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	NAME STREET ADDRESS CITY-ST-ZIP	1501 SEAMIST HOUSTON TX 77008		NAME STREE CITY-S	ST-ZIP					Addition	

of the corporation or the regelver of 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 attachpien with an address, with all other like empowered.

Daytime Phone

32E034 (10/02)

MO3480 30022146

Attachment to 2003 Uniform Business Report Pioneer Metals of Jacksonville, 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