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

PROFIT CORPORATION ANNUAL REPORT

1997

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

HINCKLEY, HARRY D.JR

6065 ROLLING RD. DR.

**MIAMI FL 33158** 



FLÒRIDA DEPARTMENT OF STATE

**FILED** 

Secretary of State

Change

Addition

99Feb 18 1997 8:00am

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000032817 (6)

PIONEER METALS OF DAYTONA, INC.

Mailing Address Principal Place of Business 3611 NW 74 ST 3611 NW 74 ST MIAMI FL 33147-5827 MIAMI FL 33147 3. Date incorporated or Qualified 3a. Date of Last Report 04/28/1994 02/28/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0496592 APPLIED FOR Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Žip Country Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HEGAMYER, WILLIAM H 3611 NW 74 ST Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI FL 33147 83 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 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) 12. 13. CP DELETE 1.1 TITLE Change Addition TITLE HEGAMYER, WILLIAM H . 1.2 NAME NAME 511 N. MASHTA DRIVE 1.3 STREET ADDRESS STREET ADDRESS **KEY BISCAYNE FL 33149** CITY - ST-ZIP 1.4 CITY - ST - ZIP Addition VD DELETE Change 2.1 TITLE TITLE HEGAMYER, LEONORA K . 2.2 NAME NAME 511 N. MASHTA DRIVE STREET ADDRESS 2.3 STREET ADDRESS **KEY BISCAYNE FL 33149** 2. 4 CITY - ST - ZIP CITY-\$1-2IP Change Addition DELETE 3.1 TITLE TITLE ROBINSON, CHARLES V. 3.2 NAME NAME 1550 NE 123 ST., N-307 3.3 STREET ADDRESS STREET ADDRESS N. MIAMI FL 33161 CITY-ST-ZIP 3.4. CITY-ST-ZIP SD DELETE Change Addition 4.1 TITLE TITLE HEGAMYER, K.L. 4.2 NAME NAME 261 GREENWOOD DR. 4.3 STREET ADDRESS STREET ADDRESS **KEY BISCAYNE FL 33149** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE MARTY, DOUGLAS C . 5.2 NAME NAME 7845 SW 67TH TERRACE STREET ADDRESS 5.3 STREET ADDRESS MIAMI FL 5.4 CITY-ST-ZIP CHY-ST-ZIP

14. I 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 of 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 charty of or on an attachment with an address.

6.1 TITLE

6.2 NAME

**6.3 STREET ADDRESS** 

6.4 CITY-ST-ZIP

DELETE

SIGNATURE: MALLY DOMNIED WATER OF WHICH OF WHICH