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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS



LLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 13 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700074971 (7

PIONEER CONSULTING, INCORPORATED

Mailing Address Principal Place of Business 38824 COLUMBIA AVE 38824 COLUMBIA AVE ZEPHYRHILLS FL 33540 ZEPHYRHILLS FL 33540 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/27/1997 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 59-3461837 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Bo Added to Fees 23 Trust Fund Contribution 28 Country Zip Country This corporation owes or has paid the current year Inlangible Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Ř1 Name OSBORNE, VICTOR J 38824 COLUMBIA AVE 82 Street Address (P.O. Box Number is Not Acceptable) ZEPHYRHILLS FL 33540 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE rectination of reportered agent and title if up plicable (NOTE: Registered Agent signalare required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DLLETE ☐ Change Addition 1.1 1111.8 TITLE OSBORNE, VICTOR J 1.2 NAME NAME 38824 COLUMBIA AVE 1.3 STREET ADDRESS STREET ADDRESS ZEPHYRHILLS FL 33540 CITY - ST- ZIP 1,4 CITY - \$1 - ZIP Addition DITE Change 2.1101.6 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 2. 4 CITY - ST- ZIF DECETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - 7HP CITY-ST-ZIF Addition Change DELETE TITLE 4.1 TOLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-S1-ZIP Change Addition DELETE 5.1 TO F TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - S1 - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME

14. Thereby 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 trusted 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 or an affecting it with an address.

6.3 STREET ADDRESS