

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

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May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S23226 (1)
1. Corporation Name
PIONEER CANADIAN (USA), INC.



Principal Place of Business
14560 GULF BLVD
MADEIRA BEACH FL 33708
US

Mailing Address
JOHN P. CULLEM ESQ 14560 GULF BLVD
856 2ND AVE NORTH MADEIRA BEACH
ST. PETERSBURG FL 33708 FL 33708

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 14560 GULF BLVD.

27 Suite, Apt. #, etc

28 MADEIRA BEACH, FL

29 33708 30 USA

3. Date Incorporated or Qualified

01/07/1991

4. FEI Number

98-0117878

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

9. Name and Address of Current Registered Agent

CULLEM, JOHN P. ESQUIRE
856 2ND AVENUE NORTH
ST. PETERSBURG FL 33701

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 (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST
NAME TOMASELLI, SANTE
STREET ADDRESS 14560 GULF BLVD.
CITY-ST-ZIP MADEIRA BEACH FL 33708

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D PRESIDENT / DIRECTOR
1.2 NAME DAVID W. SLIFKA
1.3 STREET ADDRESS 14560 GULF BLVD
1.4 CITY-ST-ZIP MADEIRA BEACH, FL 33708

2.1 TITLE VP VICE PRESIDENT
2.2 NAME TAMMY SLIFKA
2.3 STREET ADDRESS 14560 GULF BLVD
2.4 CITY-ST-ZIP MADEIRA BEACH, FL 33708

3.1 TITLE SIT SECRETARY / TREASURER
3.2 NAME CRAIG SCHUETTE
3.3 STREET ADDRESS 14560 GULF BLVD
3.4 CITY-ST-ZIP MADEIRA BEACH, FL 33708

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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

DAVID W. SLIFKA
PRESIDENT

4/28/98 813-391-8996

CR2E034 (10/97)