

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 28 PM 5: 32

DOCUMENT # H98869 (1)

1. Corporation Name
PYRAMID INTERNATIONAL CORP.

Principal Place of Business Mailing Address
12003 LANDING WAY 12003 LANDING WAY
COOPER CITY FL 33026-1004 COOPER CITY FL 33026-1004

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
02/11/1986 06/14/1994

2. Principal Place of Business 2a. Mailing Address

4. FEI Number Applied For
59-2638512 Not Applicable

21. Suite, Apt. #, etc. 25. Suite, Apt. #, etc.

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

22. City & State 27. City & State

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

23. Zip Country 28. Zip Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

24. 25. 29. 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BOWERS, RICHARD A.
300 S. PINE ISLAND RD.
PLANTATION FL 33324

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

(Print Name of Registered Agent and Title, if applicable)

(Print Registered Agent's signature and date of registration)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: **D**
NAME: **CHAO, EDMOND**
STREET ADDRESS: **12003 LANDING WAY**
CITY, ST, ZIP: **COOPER CITY FL**

TITLE: **DP**
NAME: **CHAO, BETTY**
STREET ADDRESS: **12003 LANDING WAY**
CITY, ST, ZIP: **COOPER CITY FL**

TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:

TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:

TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:

TITLE: NAME: STREET ADDRESS: CITY, ST, ZIP:

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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. 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: *Betty Chao*
SIGNATURE AND TYPE FOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/95 (305) 467-4725
DATE