

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

PROFIT CORPORATION ANNUAL REPORT



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

1996 AMENDED & RESTATED

DOCUMENT # S12279 (3)
1. Corporation Name

PIONEER INTERNATIONAL (MIAMI), INC.

FILED

36 JUN -3 AM 8:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: 7875 N.W. 12 STREET STE 203 MIAMI, FL. 33126
Mailing Address: 7875 N.W. 12 STREET STE 203 MIAMI, FL. 33126

3. Date incorporated or qualified: 11/08/1990
3a. Date of last report: 02/13/1995
4. FEI Number: 65-0226120 -NOT-APPLICABLE
5. Cert. date of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes: Yes No

2. Principal Place of Business: 21 5201 BLUE LAGOON DR. SUITE 560 MIAMI, FL 33126 USA
2a. Mailing Address: 26 5201 BLUE LAGOON DR. SUITE 560 MIAMI, FL 33126 USA

9. Name and Address of Current Registered Agent: PENINSULA REGISTERED AGENTS INC 200 SE FIRST ST PENTHOUSE MIAMI, FLORIDA 33131

10. Name and Address of New Registered Agent: 81 Name: PENINSULA REGISTERED AGENTS, INC. 82 Street Address: 200 S. BISCAYNE BOULEVARD, SUITE 4800 83 City: MIAMI FL 85 Zip Code: 33131

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS	
TITLE: <input checked="" type="checkbox"/> DELETE	STD HIRAYAMA, SACHIYUKI % 1-4-28 MITA MINATO-KU TOKYO, JAPAN
TITLE: <input checked="" type="checkbox"/> DELETE	D FUJISHIGE, SACHIYUKI 1-4-28, MITA, MINAOTO-KU TOKYO, JAPAN
TITLE: <input type="checkbox"/> DELETE	P MATSUBARA, HARUHIKO 7875 N.W. 12 ST # 203 MIAMI, FL
TITLE: <input type="checkbox"/> DELETE	
TITLE: <input type="checkbox"/> DELETE	
TITLE: <input type="checkbox"/> DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE: <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add	(D) HARUHIKO MATSUBARA 5201 BLUE LAGOON DRIVE #560 MIAMI, FLORIDA 33126
12 NAME: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	PST KOJI OKUMURA 5201 BLUE LAGOON DRIVE #560 MIAMI, FLORIDA 33126
13 STREET ADDRESS: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add	(D) SHIGEHISA OKAMURA 1-4-28 MITA MINATO-KU TOKYO, JAPAN
14 CITY ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Add	600001858896 -06/12/96--01004--008 *****81.25 *****81.25
15 CITY ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Add	
16 CITY ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Add	
17 CITY ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Add	
18 CITY ST-ZIP: <input type="checkbox"/> Change <input type="checkbox"/> Add	

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 119.073(1)(a) 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: *Koji Okumura* **KOJI OKUMURA** APRIL 30th, 1996 (305)261-4966
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)