

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -6 AM 10:04

DOCUMENT # 822263

(0)

1. Corporation Name

ALCOA INTER-AMERICA, INC.

Principal Place of Business

Mailing Address

**C/O ALUMINUM COMPANY OF AMERICA
1501 ALCOA BUILDING
PITTSBURGH PA 15219**

**C/O ALUMINUM COMPANY OF AMERICA
1501 ALCOA BUILDING
PITTSBURGH PA 15219**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/08/1969

3a. Date of Last Report

04/20/1994

4. FEI Number

25-1196905

Applied For

Not Applicable

5. Certificate 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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
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

Signature, typed or printed name of registered agent and time of acceptance

(NOTE: Registered Agent Signature required when renouncing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MOORACKEN, R.P.
STREET ADDRESS	1501 ALCOA BLDG
CITY-ST-ZIP	PITTSBURGH PA--
TITLE	S
NAME	YURA, D.A.
STREET ADDRESS	1501 ALCOA BUILDING
CITY-ST-ZIP	PITTSBURGH PA
TITLE	T
NAME	DISCHNER, EL
STREET ADDRESS	1501 ALCOA BUILDING
CITY-ST-ZIP	PITTSBURGH PA
TITLE	V
NAME	BURKE, L B
STREET ADDRESS	1501 ALCOA BLDG
CITY-ST-ZIP	PITTSBURGH PA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	Robinson, B. W.	
1.3 STREET ADDRESS	1501 Alcoa Building	
1.4 CITY-ST-ZIP	Pittsburgh, PA 15219	
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		

See Attached Sheet

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, 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: *Sandra B. Matham* **S. B. Burke-Vice President**

3/24/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature/Stamp