#### PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

#### **APPLICATION FOR** REINSTATEMENT



#### FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

#### DOCUMENT #

1. Corporation Name

#### ALCOA INTER-AMERICA, INC.

FILED LELKETARY OF SIT VISION OF CORPORA	AIL VIIO+*
03 DEC -1 PM 4:	

Principal Place of Business Mailing Address					-				
396 ALHAMBRA CR 201 ISABELLA STE 200 PITTSBURGH									
MIAMI FL 33134-0339			porroption bolow			P 03			
	If above addresses are incorrect in any way, line through incorrect information and a 2. New Principal Office Address, If Applicable 3. New Mailing Office Address				4. Date Incorp	orated or Qualified			
Suite, Apt. #, etc. Suite, Apt. #		, etc.		01/08/1969  5. FEI Number Applied For					
City & State City & State					25-1196905	Not Applicable			
Zip		Country	Zip		Country 6.		1 •	TIFICATE OF STATUS DESIRED  S8.75 Additional Fee required for a Certificate of Status	
7. Names a	and Street Ad	dresses of Each Officer and/	or Director (Flo	rida nonprof	it corpora	tions must list at lea	st 3 directors)		
Title(s)				et Address of Each City / State / Zip		ate / Zip			
PD	SCHRECKE	ER, JS	201 ISABELLA ST.				PITTSBURGH PA 15212		
S	YURA, D.A.		201 ISABELLA ST.		PITTSBURGH PA 15212				
Ţ	PLUMMER, WILLIAM B		390 PARK AVENUE		NEW YORK NY 10022				
٧	DICKEL, R.D.		201 ISABELLA ST.		PITTSBURGH PA 15212				
						70	(  D0254226  0301040008	£ E	
							12/11/	10301.040008 	** 750.UU
	8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent		Agent				
			Name						
CORPORATION SERVICE COMPANY			Street Address (P.O. Box Number is Not Acceptable)						
1201 HAYS STREET TALLAHASSEE FL 32301			Suite, Apt. #, Etc.		OSF CAN				
				City State Zip Code					
10. I, being	appointed the	e registered agent of the abo	ve named corpo	oration, am fa	amiliar wit	h and accept the ob	oligations of Secti	on 607.0505, F.S. or 617.0508	5, F.S.
Signature of Registered Agent MURA AGENT MUST SIGN  Date 1/20/03									

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

onald D. Dickel, V.P.

11/19/03

(412) 553-3197

Daytime Phone #

# ALCOA INTER-AMERICA, INC.

### **OFFICERS**

PRESIDENT VICE PRESIDENT VICE PRESIDENT VICE PRESIDENT VICE PRESIDENT VICE PRESIDENT TREASURER ASSISTANT TREASURER ASSISTANT TREASURER	TITLE
JUDITH S. SCHRECKER JULIE A. CAPONI RONALD D. DICKEL DENISE H. KLUTHE LONNIE F. NICHOL DOLORES A. YURA WILLIAM B. PLUMMER CYNTHIA E. HOLLOWAY JUDITH S. SCHRECKER	NAME
201 ISABELLA STREET, PITTSBURGH, PA 15212-5858 390 PARK AVENUE, NEW YORK, NY 10022 390 PARK AVENUE, NEW YORK, NY 10022 201 ISABELLA STREET, PITTSBURGH, PA 15212-5858	BUSINESS ADDRESS

## DIRECTORS

JUDITH S. SCHRECKER	NAME
201 ISABELLA STREET, PITTSBURGH, PA 15212-5858	BUSINESS ADDRESS

DIRECTOR

TITLE