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

PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 07, 1999 8:00 am
Secretary of State
04-07-1999 90120 020 ***150.00

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DOCUMENT # F93000003724

1. Corporation Name
RORAIMA MINING COMPANY LIMITED

Principal Place of Business	Mailing Address
122 AUBREY BARKER ST SOUTH RUIMVELDT PARK GREATER GEORGETOWN, GUYANA	122 AUBREY BARKER ST SOUTH RUIMVELDT PARK GREATER GEORGETOWN, GUYANA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 08/16/1993

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)

City & State (23) | City & State (28)

Zip (24) Country (25) | Zip (29) Country (30)

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certifcate 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 the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FRAZER, CURTIS R
18300 12TH AVE NE
NORTH MIAMI BEACH FL 33179

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 _____ 3-26-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CMD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	WALROND, GRANTLEY W DR		1.2 NAME		
STREET ADDRESS	305 MEADOW BROOK GARDENS N/A		1.3 STREET ADDRESS		
CITY-ST-ZIP	GREATER GEORGETOWN, GUYANA		1.4 CITY-ST-ZIP		
TITLE	DS	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SIMMONS, J.D.		2.2 NAME		
STREET ADDRESS	10 FIRST STREET, ALBERTTOWN N/A		2.3 STREET ADDRESS		
CITY-ST-ZIP	GEORGETOWN GU		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ARMSTRONG, AUBREY DR		3.2 NAME		
STREET ADDRESS	45 SHERATON PARK, CHRIST CHURCH N/A		3.3 STREET ADDRESS		
CITY-ST-ZIP	BARBADOS, WEST INDIES		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	WODAJIE, ABEBE		4.2 NAME		
STREET ADDRESS	P O BOX 4360 N/A		4.3 STREET ADDRESS		
CITY-ST-ZIP	ADDIS ABABA ET		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	WALROND, LEON M		5.2 NAME		
STREET ADDRESS	44 S. RUMIVELDT PARK N/A		5.3 STREET ADDRESS		
CITY-ST-ZIP	GREATER GEORGETOWN GU		5.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	DICKSON, OVRIL		6.2 NAME		
STREET ADDRESS	POSTAL HOUSING SCHEME N/A		6.3 STREET ADDRESS		
CITY-ST-ZIP	GREATER GEORGETOWN, GUYANA		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, with all other like empowered.

SIGNATURE: GRANTLEY W. WALROND 26/3/99 Tel: 5922743444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)