

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 22, 2000 8:00 am**  
**Secretary of State**

03-22-2000 90010 020 \*\*\*150.00

**DOCUMENT # F93000003724**

1. Entity Name  
**RORAIMA MINING COMPANY LIMITED**

Principal Place of Business AUBREY BARKER ST RUMVELDT PARK GEORGETOWN, GUYANA	Mailing Address 122 AUBREY BARKER ST SOUTH RUMVELDT PARK GREATER GEORGETOWN, GUYANA
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
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4. FEI Number **NOT APPLICABLE**  Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
**FRAZER, CURTIS R.**  
**18300 12TH AVE NE**  
**NORTH MIAMI BEACH FL 33179**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CMD</b> <b>WALROND, GRANTLEY W DR</b> <b>305 MEADOW BROOK GARDENS N/A</b> <b>GREATER GEORGETOWN, GUYANA</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DS</b> <b>SIMMONS, J.D.</b> <b>10 FIRST STREET, ALBERTTOWN N/A</b> <b>GEORGETOWN GU</b> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ARMSTRONG, AUBREY DR</b> <b>45 SHERATON PARK, CHRIST CHURCH N/A</b> <b>BARBADOS, WEST INDIES</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>WODAJIE, ABEBE</b> <b>P O BOX 4360 N/A</b> <b>ADDIS ABABA ET</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>WALROND, LEON M</b> <b>44 S. RUMVELDT PARK N/A</b> <b>GREATER GEORGETOWN GU</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>DICKSON, OVRIL</b> <b>POSTAL HOUSING SCHEME N/A</b> <b>GREATER GEORGETOWN, GUYANA</b> <input checked="" type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>DICKSON, OVRIL</b> <b>POSTAL HOUSING SCHEME</b> <b>GREATER GEORGETOWN, GUYANA</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>CONSTANCE CANTERBURY</b> <b>56 KEY DRIVE, ENTERPRISE GARDENS</b> <b>EAST COAST DEMERARA, GUYANA</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_\_\_\_\_ **SIGNATURE REQUIRED** Date: **15<sup>th</sup> Feb. 2000** Daytime Phone #: **5922-74344**

CR2E034 (9/99)