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

PROFIT CORPORATION ANNUAL REPORT

1999

ALCOA FUJIKURA LTD., INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9700006388

Principal Place of Business ** 105 WESTPARK DRIVE. SUITE 200

BRENTWOOD TN 37027

Mailing Address

105 WESTPARK DRIVE. SUITE 200 **BRENTWOOD TN 37027**

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90067 024 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

					12/01/1997		
2. Principal Pl	ipal Place of Business 2a. Mailing Address				4. FEI Number	Ap	plied For
21		26			25-1483401	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75	
27					5. Certificate of Status Desired	Fee Re	quired
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23					Trust Fund Contribution	Added_t	o Fees
Zip	ip Country Zip			ry	8. This corporation owes the current year In	tangible	
24	25 29		30		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
			8	1 Name			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				2 Street	Address (P.O. Box Number is Not Acceptable)		
				2 Julea	A Madress (1.4. Day Hallison to Harrisosphasio)		
PLANTATION FL 33324				3	1.27		
						, , ,	- (-
			8	4 City	FI	85 Zip (Code i
44 Discount	to the provisions of Continue 607 0503	and 607 1508 Florida Statutes	the abor	ve-named	corporation submits this statement for the purpose o	f changing its	registered
office or re	enistered agent, or both, in the State of	Florida, Such change was aut	norizea d	v the corp	oration's board of directors. I hereby accept the appo	intment as re	gistered
agent. I ar	n familiar with, and accept the obligation	ns of, Section 607.0505, Florid	ia Statute	es.			
SIGNATURE					required when reinstation) DATE		
	Signature, typed or printed name of registered agent a		egistered Ag	jent signature	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
12.	OFFICERS AND DIRECTORS DELETE		1.1 TITLE		ADDITIONS/OFFICES TO OFFICE NO.	Change	Addition
TITLE [PCEO	DEEE IE					
NAME]	HUGHES, R S		1.2 NAME				
STREET ADDRESS			1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	BRENTWOOD TN 37027			ST-ZIP			
TITLE	D	☐ DELETE	2.1 TITLE		1	Change	☐ Addition
NAME	Barton, Robert H		2.2 NAME	Ē			
STREET ADDRESS	105 WESTPARK DRIVE, SUITE 200		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	BRENTWOOD TN 37027		2.4 CITY	-ST-ZIP		-	
TITLE	D DELETE		3.1 TITLE			☐ Change	☐ Addition
NAME	KELSON, RICHARD B			<u> </u>			
STREET ADDRESS				ET ADDRESS			
	BRENTWOOD TN 37027			-ST-ZIP			
CITY-ST-ZIP _	D DELETE		4.1 TITLE		, 1	Change	☐ Addition
	U		4. 2 NAM		Managar C. Carlos Jan		
NAME	KURODA, MASATOSHI			ET ADDRESS	227 7 1 1 1 1 2 5 1 2 2 2		
STREET ADDRESS	1 5 1 KIBA, KOTO-KU				Pint 2007 130 07 1501245050		
CITY-ST-ZIP	TOKYO 13 37027 ⊠ DELETE		4.4 CITY-			☐ Change	Addition
TITLE	D	₩ nerese	5.1 TITLE 5.2 NAME		D Bahant C Wannaman		A1 / 10011011
NAME	KURODA, MASATOSHI		1		Robert G. Wennemer		
STREET ADDRESS	100 11201111111 511112, 55112 255				201 Iŝabella Street		
CITY-ST-ZIP	BRENTWOOD TN 37027			-ST-ZIP	Pittsburgh, PA 15212-5858	C) (**	□ A 4 3 3 5
TITLE	ĐŲ	☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME }	LARENCE, FRANK M		6.2 NAME	E	•		
STREET ADDRESS	105 WESTPARK DRIVE, SUITE 2	200	6.3 STRE	ET ADDRESS			-
CITY-ST-ZIP	BRENTWOOD TN 37027		6.4 CITY	-ST-ZIP			
	portify that the information supplied with	this filing does not qualify for t	he exemi	ntion state	d in Section 119.07(3)(i), Florida Statutes. I further co	ertify that the i	nformation

indicated on this annual report or supplied with this limits does not quality for the exemption stated in Section 1.19.07(3)(f), Frontal 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.

REQUERADYura-Assistant Secretary 4/ (412) 553-2281