FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # P05335 (5)

1. Corporation Name

ALCAN ALUMINUM CORPORATION

Principal Place of Business	Mailing Address
100 ERIEVIEW PLAZA CLEVELAND OH 44114	P.O. BOX 511 WARREN OH 44482 US

3. Date Incorporated or Qualified: 03/18/1985
3a. Date of Last Report: 05/01/1995
4. FEI Number: 15-0624921 ☐ Applied For ☐ Not Applicable
5. Certificate 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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business
21 6060 Parkland Blvd
Suite, Apt. #, etc.
22
City & State
23 Mayfield Heights, Ohio
Zip 24 44124 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	HACKBIRTH, DAVID W.	
STREET ADDRESS	290 BICKNELL DR.	
CITY-ST-ZIP	HUDSON OH	
TITLE	TD	☐ DELETE
NAME	BATT, GEOFFREY P.	
STREET ADDRESS	2298 WELLINGTON CIRCLE	
CITY-ST-ZIP	HUDSON OH	
TITLE	PD	☐ DELETE
NAME	BALL, ROBERT L.	
STREET ADDRESS	37159 LANDINGS DRIVE	
CITY-ST-ZIP	SOLON OH	
TITLE	VSD	☐ DELETE
NAME	YOSOWITZ, SANFORD	
STREET ADDRESS	2585 LARCHMONT DRIVE	
CITY-ST-ZIP	BEACHWOOD OH	
TITLE	VD	☐ DELETE
NAME	SANTOS, EVERALDO N.	
STREET ADDRESS	310 HENRY JARRY	
CITY-ST-ZIP	BEACONSFIELD, QUEBEC, CANADA	
TITLE	AS	☐ DELETE
NAME	KAPRALY, DONALD J.	
STREET ADDRESS	926 BRUCEWOOD DR.	
CITY-ST-ZIP	WARREN OH	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	Robert L. Ball	
1.3 STREET ADDRESS	323 Glengarry Rd.	
1.4 CITY-ST-ZIP	Aurora, Ohio	
2.1 TITLE	VD	☐ Change ☒ Addition
2.2 NAME	Claude Chamberland	
2.3 STREET ADDRESS	107 Mort Lake	
2.4 CITY-ST-ZIP	St. Lambert, Quebec, Canada	
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		

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 119.07(3)(k), 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: D J Kapraly Donald J. Kapraly 4/29/96 330-393-1149
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)