

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P10644 (3)

1. Corporation Name

UNITED STATES ALUMINUM CORPORATION - CAROLINA

Principal Place of Business

767 MONTEREY PASS ROAD
MONTEREY PARK CA 91754

Mailing Address

767 MONTEREY PASS ROAD
MONTEREY PARK CA 91754



3. Date Incorporated or Qualified

07/02/1986

3a. Date of Last Report

01/31/1995

4. FEI Number

95-3953238

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARQUESS, JEFFERY S.
2441 GRAND TETON CIRCLE
WINTER PARK FL 32792

81

Name

James Caperton

82

Street Address (P.O. Box Number is Not Acceptable)

4506 L B McLeod Road

83

84

City

ORLANDO

FL

85

Zip Code

32811

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

James Caperton

Signature, typed or printed name of registered agent and title, if applicable

James Caperton

(Typed or printed name of registered agent and title, if applicable)

1/18/96

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

☐ DELETE

NAME

CUNNINGHAM, JOHN P.

STREET ADDRESS

1903 WINDSOR ROAD

CITY-STATE-ZIP

SAN MARINO CA

TITLE

VSD

☐ DELETE

NAME

TREINEN, DAVID

STREET ADDRESS

1731 BEECHHILL DRIVE

CITY-STATE-ZIP

HACIENDA HEIGHTS CA

TITLE

ST

☐ DELETE

NAME

YOUNG, ROLAND A. (ASST.)

STREET ADDRESS

16255 PACIFIC CIRCLE #202

CITY-STATE-ZIP

HUNTINGTON BEACH CA

TITLE

D

☐ DELETE

NAME

VANDERSTAR, CORNELIUS C.

STREET ADDRESS

813 FOOTHILL ROAD

CITY-STATE-ZIP

BEVERLY HILLS CA

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-20-96 (213) 264-1670

CR2E034 (12/95)