

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

FILED
Jan 27 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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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 91754-3806
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/02/1986	3a. Date of Last Report 01/29/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 95-3953238		Applied For Not Applicable	
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. Country	29. Country	30. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
CAPERTON, JAMES 4506 L B MCLEOD ROAD ORLANDO FL 32811				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 _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	Vice President - Operations <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CUNNINGHAM, JOHN P.	1.2 NAME	RUDY, Ronald L.
STREET ADDRESS	1903 WINDSOR ROAD	1.3 STREET ADDRESS	90 Rivo Alto Canal
CITY-ST-ZIP	SAN MARINO CA	1.4 CITY-ST-ZIP	Long Beach, CA 90803
TITLE	VSD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TREINEN, DAVID	2.2 NAME	
STREET ADDRESS	1731 BEECHHILL DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	HACIENDA HEIGHTS CA	2.4 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOUNG, ROLAND A. (ASST.)	3.2 NAME	
STREET ADDRESS	16255 PACIFIC CIRCLE #202	3.3 STREET ADDRESS	
CITY-ST-ZIP	HUNTINGTON BEACH CA	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VANDERSTAR, CORNELIUS C.	4.2 NAME	
STREET ADDRESS	813 FOOTHILL ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	BEVERLY HILLS CA	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE: *Roland A. Young* **ROLAND A. YOUNG** TREASURER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-13-97 (213)264-1670
 Date Daytime Phone #

CR2E034 (9/96)