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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham 🖫 Secretary of State

DIVISION OF CORPORATIONS

1996

P93000058486 (0) **DOCUMENT #**

RIO TINTO, INC.

THE THIT O, THE	
Principal Piace of Business	Mailing Address
2870 NW 72ND AVE MIAMI FL 33122	2822 N.W 72ND AVE. MAMM FL 33122

Principal Piace	of Business	Mailing Address					
2870 NW 7 MIAMI FL 3		2822 N.W 72ND AVI Miami FL 33122	E .				
US					3. Date Incorporated or Qualified 08/20/1993	3a. Dat	e of Last Report 02/10/1995
2. Principal Plant	ice of Business	2a. Mailing Address 26. Same	asas	OM	4. FE'l Number 65-0432145		Applied For
21 Suite: Apt. #	arr C	26 Saite. Apt. #, etc.	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	,, C			Not Applicable \$8.75 Additional
22	·, etc.	27			5. Certificate of Status Desired	×	Fee Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for		ax under s. 199.032,
24	25	29	30		Florida Statutes XYes No 10. Name and Address of New Registered Agent		
	9. Name and Address of Curr	rent negistered Agent	81	Name .	· · · · · · · · · · · · · · · · · · ·	egistered	Agent
DIAZ	HIGINIO JR.		L	· >	<i>Bake</i>		
•	N.W. 72ND AVE.		82	Street Add	ress (P.O. Box Number is Not Acceptat	ile)	
	FL 33122		83			•	
	(84	City			85 Zip Code
	:			′		FL	-
11. Pursuant to or registere tamiliar with	o the provisions of Sections 607.05 ed agent, or both, in the State of El Mand accept the obligation	502 and 607.1508, Florida Statut orida. Soch change was authoriz solio 1607.0505, Florida Statutes	es, the above- ed by the corp	named corpo loration's boa	oration submits this statement for the pul and of directors. Thereby accept the app	pose of ch ointment as	anging its registered office s registered agent. I am
SIGNATURE _	Si navire, types or plated have of registered a	peri and the contract. (No	Resic	Cnt d signature region	est when the ast dang	5-5	-96.
,12.	OFFICERS /		13.		ADDITIONS/CHANGES TO OFF		
TITLE	P	☐ DELETE	1. 1 TILLE	1			Change Addition
NAME:	DIAZ, JR. H 2822 N.W. 72ND AVE.		1.2 NAME		1- no		
SIREET ADDRESS	MIAMI FL		B	LADDRESS	Same		
CITY-ST-ZIP	INDANI LE	DELETE	1.4 CHY-5 2-1 THE	21 · Zi)************************************	· · · · · · · · · · · · · · · · · · ·		Change Addition
I NAME	FONTE, MARIA C	<u></u>	2.2 NAME		1	'	
STREET ADDRESS	2822 N.W. 72ND AVE.		2 3 STREE	ADDRESS	Same Same		
CHY-S1-ZIP	MIAMI FL 33122		2 4 City - 9	!			
THE		DELETE	3 1 TITLE				Change Addition
NAME			3.2 NAME		ر سال المال والمال والمال والمال والمال والمال والمال		_
STREET ADDRESS				LADDRESS	9000017 -03/19/9601	A C I	195
CITY - ST - ZIP		☐ DELETE	3.4 C·TY - :	SI - 7:f*	***208.75		<i>引力</i> □ Change □ Addition
TITLE			4 1 111LE 4.2 NAME				C cuande C woomen
NAME STREET ADDRESS				ADDRESS			
CITY-ST-ZIP			4.4 C/TY - 5	1			
11*LE	* *	DELETE	5 1 TITLE	21.7.1			Change Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ADDRESS			
CITY-ST-ZIP			5.4 CITY - 5	,			<u> </u>
TIT₁€		☐ DELETE	6 1 TITLE				Change Addition
NAME			6.2 NAME				
STREET ADDRESS			63 STHEE	ADDRESS			
CITY ST-ZIP			6.4 CITY - 1	S1-71 ^p			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an oddress.

Du Resident 3-5-96 (305) 592-15/4 SIGNATURE: SIGNATURE AND TYPED