2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# P99000086339

Entity Name: ALUMINA USA, INC.

Current Principal Place of Business:

4000 PONCE DE LEON BLVD.
STE 450
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4000 PONCE DE LEON BLVD.
STE 450
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 65-0951392 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

ROBINSON, WESLEY M ESQ.
501 BRICKELL KEY DRIVE
SUITE 504
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

JULIAN, MONTERO F ESQ.
18851 N.E. 29TH AVENUE
SUITE 900
AVENTURA, FL 33180 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JULIAN F. MONTERO, ESQ. 04/26/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GARCIA, LUIS MIGUEL
Address: 4000 PONCE DE LEON STE 450
City-St-Zip: CORAL GABLES, FL 33146

Title: D ( ) Delete
Name: SANTO DOMINGO, FELIPE
Address: 12 TURTLE WALK
City-St-Zip: KEY BISCAYNE, FL 33149

Title: P ( ) Delete
Name: SANTO DOMINGO, MIGUEL
Address: 2127 BRICKELL AVE APT 602
City-St-Zip: MIAMI, FL 33129

Title: VP ( ) Delete
Name: MCALLEJAS, MARIO
Address: 2428 CORDOBA BEND
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIGUEL SANTO DOMINGO P 04/26/2006
Electronic Signature of Signing Officer or Director — Date