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Feb 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P20435 (4)

1. Corporation Name
AGLOW INTERNATIONAL, INCORPORATED



Principal Place of Business Mailing Address
152-3RD AVE SO STE 103 EDMONDS WA 98020 US
P.O. BOX 1548 LYNNWOOD WA 98046-1548 US

3. Date Incorporated or Qualified 06/10/1988 3a. Date of Last Report 02/28/1996

2. Principal Place of Business 21 2a. Mailing Address 26 PO Box 1749 4. FEI Number 23-7275330 Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State 27 Edmonds, WA 98020-1749 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip Country 28 Edmonds, WA 98020-1749 30 Snohomish 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
COOK, PATRICIA 749 NW PICNIC ST PT CHARLOTTE FL 33952
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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---|---|--|
| TITLE | PD HANSEN, JANE 9138 186TH PL., SW EDMONDS WA 98026-5748 | 1.1 TITLE | |
| NAME | | 1.2 NAME | |
| STREET ADDRESS | | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 1.4 CITY-ST-ZIP | |
| TITLE | V CARLSON, LORENE- 6105-152ND-STREET S.E.- SNOHOMISH WA 98090 | 2.1 TITLE | V Laurie Lischke 16705 - 56th Ave. W. Lynnwood, WA 98037-8999 |
| NAME | | 2.2 NAME | |
| STREET ADDRESS | | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | |
| TITLE | S FINK, DEE 1410 126TH ST. SE EVERETT WA 98208 | 3.1 TITLE | |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | T ROGERS, KAY 14803 WEST 40TH AVE LYNNWOOD WA 98037 | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | D SHERRER, QUIN 5320 EVENING LIGHT COURT COLORADO SPRINGS CO 80917 | 5.1 TITLE | D Ruth Friesen 342 Marino Dr. North Salem, OR 97303 |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | D BYERLY, BOBBYE 2717 144TH CT SE MILL CREEK WA 98012 | 6.1 TITLE | |
| 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE: 2/7/97 (206) 775-7282

CR2E037 (9/96)