

2023 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20435

Entity Name: AGLOW INTERNATIONAL, INCORPORATED**Current Principal Place of Business:**123 - 2ND AVE. SO.
STE 100
EDMONDS, WA 98020**Current Mailing Address:**P.O. BOX 1749
EDMONDS, WA 98020-1749 US**FEI Number:** 23-7275330**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALPIZAR, REBECCA
670 BARCELONA CT
SATELLITE BEACH, FL 32937 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	HANSEN HOYT, JANE
Address	13813 65TH AVE W #5
City-State-Zip:	EDMONDS WA 98026

Title	S
Name	JONES, LINDA
Address	620 112TH ST SE #196
City-State-Zip:	EVERETT WA 98208

Title	T
Name	ROGERS, KAY
Address	14603 40TH AVE. WEST
City-State-Zip:	LYNNWOOD WA 98037

Title	D
Name	FLEMING, GLENDA
Address	2110 BELAIR ST.
City-State-Zip:	PASCAGOULA MS 39567

Title	D
Name	MODER, DIANE
Address	2717 PHILADELPHIA AVE
City-State-Zip:	PITTSBURGH PA 15216

Title	DIRECTOR
Name	MCVEIGH, EVANNE
Address	38 IMEARY ST
City-State-Zip:	SOUTH SHIELDS NE34 4EG

Title	DIRECTOR
Name	MBUZI, ELIZABETH
Address	PO BOX 30080
City-State-Zip:	LUSAKA

Title	DIRECTOR
Name	SWAN, EDDA
Address	LYNGPRYDI 6
City-State-Zip:	GARDABAER 210

Continues on page 2

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KAY ROGERS

TREASURER

04/20/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name ALLEN, RICK
Address PO BOX 1749
City-State-Zip: EDMONDS WA 98020

Title DIRECTOR
Name TSOI, ALICE
Address 9 15TH ST
City-State-Zip: HONG LOK YUEN TAI PO NT

Title DIRECTOR
Name MORALES, SHELLY
Address 347 N FM 772
City-State-Zip: KINGSVILLE TX 78363