

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

**FILED**  
**Feb 03 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 366051 (1)**

1. Corporation Name  
**ALHI SALES INC**

Principal Place of Business 1836 NW 23 STREET MIAMI FL 33142	Mailing Address 1836 NW 23 STREET MIAMI FL 33142
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>06/23/1970</b>	
21	22	26	27	4. FEI Number <b>59-1318658</b>	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <b>\$5.00 May Be Added to Fees</b>	
23	24	28	29	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Zip	Country	Zip	Country		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
ROSILLO,ALBERT 525 N.W. 27 AVENUE MIAMI FL 33145				81 Name	<b>CARMEN E. Gonzalez</b>		
				82 Street Address (P.O. Box Number is Not Acceptable)	<b>1935 SW. 17 COURT.</b>		
				83			
				84 City	<b>MIAMI</b>	85 Zip Code	<b>FL 33145</b>

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: *Santiago R. Gonzalez* **SANTIAGO R. GONZALEZ 1-28-98** DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDS <input type="checkbox"/> DELETE	1.1 TITLE	PDS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GONZALEZ, CARMEN E	1.2 NAME	<b>GONZALEZ E. CARMEN</b>
STREET ADDRESS	1935 SW 17 COURT	1.3 STREET ADDRESS	<b>1935 SW. 17 COURT</b>
CITY-ST-ZIP	MIAMI, FL 00000	1.4 CITY-ST-ZIP	<b>MIAMI, FL 33145-2707</b>
TITLE	VDT <input type="checkbox"/> DELETE	2.1 TITLE	VDT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GONZALEZ, SANTIAGO R	2.2 NAME	<b>SANTIAGO R. GONZALEZ</b>
STREET ADDRESS	1935 SW 17 COURT	2.3 STREET ADDRESS	<b>1935 SW. 17 COURT</b>
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	<b>MIAMI, FL 33145-2707</b>
TITLE	D <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARMEN, TRIMAS R	3.2 NAME	
STREET ADDRESS	323 NW 105TH STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 00000	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GREGORY GONZALEZ R.</b>	4.2 NAME	
STREET ADDRESS	<b>11451 SW. 42 TERRACE</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL 33165-4620</b>	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 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 my address.

SIGNATURE: *Santiago R. Gonzalez* **1-28-98** **305-634-726**

CR2E034 (10/97)