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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 561501

(8)

ALWAYS INTERNATIONAL DISTRIBUTORS CORP.

Principat Place	o of Business	Mailing Address				
C/O A. F. ALENTADO & ASSOC. CORP. C/O A. F. ALENTADO & A 1149 SW 27 AVE #203 MIAMI FL 33135 MIAMI FL 33135-4758			issoc. Co	₹ ₽.		
					3. Date incorporated or Qualified 03/08/1978	3a, Date of Last Report 03/26/1996
2. Principal P	lace of Business	2a. Mailing Address		——————————————————————————————————————	4. FEI Number	Applied For
21	H	26			59-1804583	Not Applicable
Suite, Apl.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	· · · · · · · · · · · · · · · · · · ·	City & State			# Clastics Committee Financian	\$5.00 May Be
23	V	28			6. Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Coun	ry	8. This corporation has liability for	
24	25	29	30		1 7	Yes No
	g. Name and Address of Curr	rent Registered Agent			10. Name and Address of New Re	gistered Agent
	INTADO, ANTONIO F.		٤	1 Name		
1149 SW 27 AVE #203			Įε	2 Street Addi	ress (P.O. Box Number is Not Acceptate	ole)
MIA	MI FL 33135		<u> </u>		· · · · · · · · · · · · · · · · · · ·	
			8	3		
			8	4 City		85 Zip Code
···		EOO LOOT LEON EL 11 OLA				FL 2 2 5 5 5
office or r	to the provisions of Sections 607.L registered agent, or both, in the Sta im familiar with, and accept the ob-	ate of Etorida. Such change was a	authorized	by the corporal	poration submits this statement for the tion's board of directors. I hereby acce	pt the appointment as registered
SIGNATURE						
·	Signature, typed or printed name of registered			igent signature requi	red when reinstating)	DATE
12.	PID	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICE	Change Addition
TITLE	SAIEH, SALVADOR	[DELL'S	1.1 TITL 1.2 NAM			Onlinge Nation
NAME STREET ADDRESS	1361 N.E. 118TH ST.		1	ET ADDRESS		
CITY-ST-ZIP	MIAMI, FL O			-ST-ZIP		
TITLE	VO	DELETE	2.1 TITL			Change Addition
NAME	SAIEH, GILMA		2.2 NAN	}		
STREET ADDRESS	1381 N.E. 118TH ST.			ET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 0			1-ST-ZIP		
TITLE	8	☐ DELETE	3.1 TITL		, , , , , <u>, , , , , , , , , , , , ,</u>	Change Addition
NAME	SAIEH, YAMILE		3.2 NAN	E	•	
STREET ADDRESS	1361 N.E. 118TH ST.	•	3.3 STR	ET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 0		3.4. CIT	r-ST-ZIP	•	
TITLE		DELETE	4.1 TITL			☐ Change ☐ Addition
NAME			4. 2 NA	AE		
STREET ADDRESS			4.3 STR	ET ADDRESS		
CITY - ST - ZIP				-ST-ZIP	<u> </u>	
TITLE		DELETE	5 1 TITL			Change Addition
NAME			5 2 NAN			
STREET ADDRESS				ET ADDRESS		
CITY-ST-7IP	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	T per ear		-ST-ZIP		TIAL PIZZO
TITLE		DELETE	61 TITL			Change Addition
NAME			62 NAN			
STREET ADDRESS				ET ADDRESS	•	
CITY-ST-ZIP			6.4 C(T)	-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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. Saich vice hes. 1/15 SIGNATURE:

FILED

Jan 23 1997 8:00am

Secretary of State