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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 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25
2a. Mailing Address 26 PO Box 1749 27 Edmonds, WA 98020-1749 28 City & State Edmonds, WA 98020-1749 29 Zip 98020-1749 30 Country Snohomish
4. FEI Number 23-7275330 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current 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)