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

PROFIT CORPORATION ANNUAL REPORT

1998

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STREET ADDRESS

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CITY-ST-ZIP

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TITLE

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NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000053333 (6)

ALWAYS ENTERPRISES, INC.

Principal Place of Business Mailing Address 11195 SANDPOINT TERRACE 11195 SANDPOINT TERRACE **BOCA RATON FL 33428 BOCA RATON FL 33428** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/21/1996 2, Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0674139 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 23 Trust Fund Contribution Added to Fees Zin Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes ∏ No 24 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SILVERIO, E 7179 PEMBROKE ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **PEMBROKE PINES FL 33023** 83 84 85 Zip Code 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 Signature, typed or printed hadre of registered agent and tite if applicable (NOTE: Registered Agent signature required when reinstating) (1097 12. OF LICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PSTD DELETE Change Addition TITLE 1.1 TITLE ROSENRAUCH, DAVID R 1.2 NAME NAME 2E034 11195 SANDPOINT TERRACE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33428** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE SAMY RUSENRAUCH 11195 SANDPOINT TERRACE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS BOCA KATON FL 23428 CITY-ST-ZIP 2.4 City-St-ZIP Change DELETE Addition 3.1 TITLE ILONA ROBNRAUCH NAME 3.2 NAME 11195 SANDPOINT TERRACE STREET ADDRESS 3.3 STREET ADDRESS BOCA KATON FL 33428 CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Change Addition 4.1 TOLE TITLE NAME 4. 2 NAME

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 13 if changed, or open attachment with an address

4.3 STREET ADDRESS 4.4 CITY - ST- ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

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Change

Addition

Addition

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Apr 23 1998 8:00am

Secretary of State