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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000056850 (6)

1. Corporation Name
ALLWAYS INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
42112 FISHER ISLAND FISHER ISLAND FL 33109	42112 FISHER ISLAND FISHER ISLAND FL 33109-1276

- Amended -

3. Date Incorporated or Qualified: 07/05/1996
3a. Date of Last Report: 07-05-97

Principal Place of Business	2a. Mailing Address
21 10302 NW South River Drive	26 10302 NW South River Drive
Suite, Apt. #, etc. 22 Bay 21	Suite, Apt. #, etc. 27 Bay 21
City & State 23 Medley, FL	City & State 28 Medley, FL
Zip 24 33178 Country 25 USA	Zip 29 33178 Country 30 USA

4. FEI Number: 65-0692197 ☐ 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

BARRY, TENSUE E
19153 FISHER ISLAND
FISHER ISLAND FL 33109

10. Name and Address of New Registered Agent

81 Name: Waldy Castro
82 Street Address (P.O. Box Number is Not Acceptable): 10645 NW 7 Street
83
84 City: Pembroke Pines FL 85 Zip Code: 33026

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: _____ 4-29-97 1-31-97
Signature, type or print name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (DATE)

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARRY, TENSIE E 19153 FISHER ISLAND FISHER ISLAND FL 33109 ☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP: President Angelica Zapata 555 Chestnut Circle Weston, FL 33326 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP: Delete TI ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP: President Waldy Castro 10645 NW 7 Street Pembroke Pines, FL 33026 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP: 500002292345--7 -09/12/97--01131--012 *****61.25 *****61.25 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP: J. Alaw 9/10/97 ☐ Change ☐ Addition

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.

(305) 883-0886

SIGNATURE: _____ 4-29-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #