FILED AM e

ANNUAL REPORT				Feb 25, 2005 08:00			
DOCUMENT # P9800001111 1. Entity Name ALPHA AND OMEGA ELECTRONICS DISTRIBUTOR INC.					Se	cretary	of Stat
ALPHA A	IND OWIEGA ELECTRONICS	DISTRIBUTOR INC.					
Principal Place 2856 N. W. 7	72 AVENUE	Mailing Address 2856 N. W. 72 AVENUE					
MIAMI, FL 3.	3122 <u> </u>	MIAMI, FL 33122		 	I d rus İdris Buril Va sil daril		(19 0 0) (1 91 000) (1900)
	 						
DO NOT WRITE IN THIS SPACE				02142005	No Chg-P	CR2E034 (10	0/03) Applied For
				4. FEI Numbe 65-0804	1991	- \$8.7	Not Applicable 5 Additional
				5. Certificate	of Status Desired		equired
	6. Name and Address of Current Re	igistered Agent	-				
CHO, KYU YONG 3877 BIMINI				DO	NOT W	RITE	
COOPER CITY, FL 33026				IN T	HIS SP	ACE	
	named entity submits this statement for t	he purpose of changing its register	red office or register	red agent, or both	n, in the State of Flor	ida. I am familia	with, and accept
•	lions of registered agent.	••	•				
SIGNATURE	Signature typed or printed name of registered agent and	s late if applicable - (RICTE Registers	ed Agent signature required	d when reinstating)		DATE	
	E NOW!!! FEE IS \$150,00 ay 1, 2005 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution.		.00 May Be led to Fees			
10.	OFFICERS AND D	RECTORS	1		=		
IIILE Name	CHO, KYU YONG		i		100000 02/25/05-	1249389	
STREET ADDRESS CITY - ST - ZIP	3877 BIMINI COOPER CITY, FL 33026		j		じとくといくじつつ	&NN38-NN	3 150.00
Title	COOPER GITT, PE 33020		1				
NAME			ľ				** - 25
STREET ADDRESS GITY-ST ZIP			1				
1011£							
NAME STREET ADDRESS					* 1 / \ "	Danger R spallers Baselins	
CHY-S1-ZIP			1	DO	NOT W	KIIE	
THLE NAME			1	IN 7	THIS SP	ACE	
STREET ADDRESS							
CHY-ST ZIP							
NAME			}				
STREET ADDRESS CITY ST ZIP		* ···	1				
ا ⊾است این اندرت	,		-				

12. I nereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: _

HILL NAME STRLLT ADDRESS CHY ST ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR