

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

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95 FEB 27 PM 2:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

**DOCUMENT # F03100 (7)**

1. Corporation Name  
**GREAT IMPORT & EXPORT, CORP.**

Principal Place of Business: **18866 NW 63 COURT CIRCLE MIAMI FL 33015**

Mailing Address: **2085 GRAND AVENUE 106 ST. PAUL MN 55105 US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: **18866 NW 63 COURT CIRCLE MIAMI FL 33015**

2a. Mailing Address: **2085 GRAND AVENUE 106 ST. PAUL MN 55105 US**

3. Date Incorporated or Qualified: **10/24/1980**

3a. Date of Last Report: **04/04/1994**

4. FEI Number: **59-2166316**

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 § 199.037, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent

**TOBON, JUAN CARLOS  
18866 NW 63 COURT CIRCLE  
MIAMI FL 33015**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

85. Zip Code: **FL**

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: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	<b>P</b>
NAME	<b>TOBON, JUAN CARLOS</b>
STREET ADDRESS	<b>18866 NW 63RD COURT CIR</b>
CITY-ST-ZIP	<b>MIAMI FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>DIRECTOR</b>
2.3 STREET ADDRESS	<b>PATRICIA SUAREZ</b>
2.4 CITY-ST-ZIP	<b>2085 GRAND AVE./106 ST. PAUL, MN 55105</b>
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in § 199.037(6)(b), 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 of this report, or on an attachment with an address.

SIGNATURE:  **JUAN CARLOS TOBON** 02/20/95 (612)6999254

DATE: \_\_\_\_\_