

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

**FILED**  
**Apr 14, 1999 8:00 am**  
**Secretary of State**

04-14-1999 90151 067 \*\*\*150.00  
 04-14-1999 90151 068 \*\*\*\*\*8.75

PROFIT CORPORATION  
 ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # F03100**

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

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

Mailing Address  
**3057 COOPER OAKS TRAIL  
 WOODBURY MN 55125  
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 **2950 N.W. 75th AVE.**

2a. Mailing Address

26 **2950 N.W. 75th AVE.**

Suite, Apt. #, etc.

22 **MIAMI, FL**

Suite, Apt. #, etc.

27 **MIAMI, FL**

City & State

23 **MIAMI, FL**

City & State

28 **MIAMI, FL**

Zip

24 **33122**

Country

Zip

29 **33122**

Country

30

3. Date Incorporated or Qualified

**10/24/1980**

4. FEI Number

**59-2166316**

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 owes the current year Intangible Personal Property Tax.  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 **JUAN CARLOS TOBON**

82 Street Address (P.O. Box Number is Not Acceptable)  
**2950 N.W. 75th AVE**

83

84 City **MIAMI**

**FL**

85 Zip Code **33122**

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 **JUAN CARLOS TOBON / PRESIDENT**

DATE **03/22/99**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P**  DELETE  
 NAME **TOBON, JUAN CARLOS**  
 STREET ADDRESS **18866 NW 63RD COURT CIR**  
 CITY-ST-ZIP **MIAMI FL**

TITLE **D**  DELETE  
 NAME **SUAREZ, PATRICIA**  
 STREET ADDRESS **3057 COPPER OAKS TRL**  
 CITY-ST-ZIP **WOODBURY MN 55125**

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **DIRECTOR, PRESIDENT, TREASURER**  Change  Addition  
 1.2 NAME **JUAN CARLOS TOBON**  
 1.3 STREET ADDRESS **2950 N.W. 75th AVE**  
 1.4 CITY-ST-ZIP **MIAMI, FL 33122**

2.1 TITLE **SECRETARY**  Change  Addition  
 2.2 NAME **LAWRENCE E. KOSLOW**  
 2.3 STREET ADDRESS **100 N. 6th St. Suite 300A**  
 2.4 CITY-ST-ZIP **MINNEAPOLIS, MN 55402**

3.1 TITLE  Change  Addition  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **JUAN CARLOS TOBON / PRESIDENT**

DATE **03/22/99**

Daytime Phone # **(651) 578429**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (11/98)