SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600001640 (9)

GLOBAL FINANCIAL GROUP, INC. OF MINNESOTA

Principal	Place	of	Business
-----------	-------	----	----------

FILED Sep 16 1997 8:00am Secretary of State



くいことい にくくろひ

Principal Plac	ce of Business	Mailing Address				,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		100 WASHINGTON SQ #1	Washington sq #1319 Neapolis MN 55401			
		MINNEAPOLIS MIN 334U1			DO NOT WRITE IN THIS SPACE	
					3. Date incorporated or Qualified	3a. Date of Last Report
					04/01/1996	Can have by East Hope to
2. Principal (Place of Business	2a. Mailing Address			4. FEI Number	Applied For
		26			84-1102046	Not Applicable
		Suite, Apt. #, etc.				SQ 75 Additional
27		27			5. Certificate of Status Desired	Fee Required
City & State City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes or has pa	id the current year Intangible
24	25	29	30		Personal Property Tax due June	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered Agent
	INN, RICHARD 👌 🗸 🗸	The Day	E	Name	Jon Than	
	IS HALL LN #400		8	2 Street Add	dress (P.O. Box Number is Not Acceptate	(e)
MA	JTLAND FL 32751			6	500 Corporate	° ≠ 100
			8	13	• -	
			·	4 City.		85 Zip Code
			۱۳		ort Landa-dale	FL 33334
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statu	ites, the abo	ove-named co	prporation submits this statement for the p	ourpose of changing its registered
office of	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such change was itions of, Section 607,0505, Fl	authorized Iorida Statul	by the corpora les.	ation's board of directors. I hereby accep	of the appointment as registered
SIGNATURE						
SIGNATURE	Signature, typed or printed name of registered ages	of and title if applicable (NO	TE: Registered A	lgent signature req	ju red when re:nstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	DCP	DELETE	11 TiT()	Ī .		L. Change L Acidition
NAME	MILLER, KEVIN S		1.2 NAM	Æ		
STREET ADDRESS			. 1.3 STRE	E1 ADDRESS		
CITY-ST-ZIP	MINNEAPOLIS MN 55401		1.4 CITY	- ST - ZIP		
TITLE	DT	☐ DELETE	2.1 HTL			Change Acdition
NAME	LARSON, DANIEL E		2.2 NAM	E		
STREET ADDRESS			2.3 STRE	EET ADDRESS		
CITY-ST-ZIP	MINNEAPOLIS MN 55401		2. 4 CITY	Y-SI-ZIP		
TITLE	0	DELETE	3.1 1111			Change Addition
NAME	FLATER, GARY	,	3.2 NAM	E (
STREET ADDRESS			3 3 STRE	EET ADDRESS		
CITY-ST-ZIP	ENGLEWOOD CO		3.4. C(T)	r - ST - ZIP		
TITLE	V	DELETE	4.1 THTLE	i		☐ Change ☐ Addition
NAME	LUIKENS, CECE		4. 2 NAN	AE		
STREET ADDRESS			4.3 STRE	E1 ADDRESS		
CITY-ST-ZIP	MINNEAPOLIS MN 55401		4.4 CITY	-ST-ZIP		
TITLE	\$	☐ DELETE	5.1 71711			Change Addition
NAME	ROTH, SHANE		5.2 NAM	£]		
STREET ADDRESS	100 WASHINGTON SQ #1319		53 STRE	ET ADDRESS		
CITY-ST-ZIP	MINNEAPOLIS MN 55401		5.4 CITY	-SY-ZIP		
TITLE		DELETE	6.1 TITL	Ē		Change Addition
NAME			6.2 NAM	E		
STREET ADDRESS			6.3 STRE	ET ADDRESS		
CITY-ST-7IP			6.4 CITY	- ST- ZIP		
14. do here	aby certify that the information supplied	with this filing does not qual	lify for the e	xemption state	ed in Section 119.07(3)(i), Florida Statute	s. I further certify that the
informati I am an « appears	ion indicated on this annual reput or sofficer or director of the corporation of hin Block 12 or Block 13 if changed, or	upplemental/annual report is the receipter or trustee empowen an attachment with an ad-	true and ac wered to ex Idress.	curate and the ecute this rep	ed in Section 119.07(3)(i), Florida Statute lat my signature shall have the same lega lort as required by Chapter 607, Florida S	al effect as if made under oath; that Statutes; and that my name