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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000038580

GREAT MIAMI IMPORT & EXPORT, INC.

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90105 033 ***150.00



		Mailing Address				4 iliai laiai dii	84 1910 BB11 1880
Principal Place of Business		Mailing Address	·				
9511 FOUNTAIN MIAMI FL 33172	NEBLEAU BLVD APT 309	9511 FOUNTAINEBL MIAMI FL 33172	eau blvd., apt	309			
MINMI 1 C 33172	•	MINMITE VOITE			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					04/30/1997		
2. Principal P	lace of Business	2a. Mailing Addres	2a. Mailing Address		4. FEI Number	· LL'	Applied For
21		26	26		65-0749627		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.		5. Certificate of Status Desired Sa.75 Additional Fee Required		
22		27			•		
City & State		City & State	City & State		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
23		28			Trust Fund Contribution		d to Fees
Zip	Country	Zip		untry	8. This corporation owes the current year Ir	ntang≀ble ☐ Yes	□No
24	25	29	30	1	Personal Property Tax.		
	9. Name and Address of Cu	irrent Registered Agent		81 Name	10. Name and Address of New Registered	Hygeni	
TUESTA, ENRIQUE				T Harris			
	STA, ENRIQUE FOUNTAINEBLEAU BLVD., /	APT 200		82 Street Add	ress (P.O. Box Number is Not Acceptable)		
	MI FL 33172	AI I 003		92			
IMAN	m (L 33 1/2			83			
A 1. 1				84 City		85 Zi	p Code
	. 11	, , , , , , , , , , , , , , , , , , ,	· ·	<u>ļ. 'L</u>	FI		ita raajatarad
office or r	edistared agent or both in the S	State of Florida, Such change	e was authorize	d by the corporate	poration submits this statement for the purpose on's board of directors. I hereby accept the appo	i changing i	registered
agent. I a	m familiar with, and accept the o	bligations of, Section 607.05	05, Florida Stat	tutes.			
SIGNATURE					· ' '		* * 1 * * * * * * * * * * * * * * * * *
	Signature, typed or printed name of registere	st agent and title if applicable. S AND DIRECTORS		d Agent signature require	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	TORS IN 12
12.	OTTIOER	DEL	ETE 1.1 TI	· ·	ADDITIONS/CHANGES TO OFFICERS A	Change	
TITLE	PD THEOTA ENDIQUE		1.7 N	1			
NAME	TUESTA, ENRIQUE	LVD ART GOO					
STREET ADDRESS	*	LVD., AP1 309	1	TREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33172	DEL		ITY-ST-ZIP		Change	e Addition
TITLE	DST	∐ DEL				□ 5.12.13	
NAME	AGUILAR, FRANCISCO	UD IDT OO	2.2 N				
STREET ADDRESS		LVD., APT 309		TREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33172			CITY-ST-ZIP		Chang	e Addition
TITLE		DEL				□ Criang	c Managor
NAME			3.2 N	1			
STREET ADDRESS			3.3 S	TREET ADDRESS .			
CITY-ST-ZIP				CITY-ST-ZIP			n
TITLE		☐ DEI	.ETE 4,1 T	TILE		Chang	e
NAME			4.21	NAME			
STREET ADORESS			4.3 S	TREET ADDRESS			
CITY-ST-ZIP				ITY-ST-ZIP			
TITLE	\ <u></u>	☐ DEL		l l		Change	e Addition
NAME			5 2 N	IAME			
STREET ADDRESS			5.3 S	TREET ADDRESS			
CITY-ST-ZIP			5.4 C	ITY-ST-ZIP			=#
TITLÉ		☐ DEL	.ETE 6.1 T	ITLE		☐ Chang	e Addition
NAME			6.2 N	AME			
STREET ADDRESS			6.3 S	TREET ADDRESS			
CITY, ST. 7IP			6.4 C	ITY-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: _