2006 FOR PROFIT CORPORATION

May 04, 2006 8:00 am **ANNUAL REPORT** Secretary of State DOCUMENT # K99532 05-04-2006 90252 017 ***150.00 1. Entity Name CONTINENTAL ACQUISITIONS, INC. Principal Place of Business Mailing Address 70/010/01 2665 S BAYSHORE DR, STE 1002 2665 S BAYSHORE DR, STE 1002 MIAMI, FL 33133 US LEON BLUG. \$1250 2121 PONCE de LEON MAM, FL 33133 US 2121 PANCE de LEON BLUD, #1250 CORAL GABLES, 7L. 3313U CORAL JABLES, 7L 33134 04262006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0141580 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCHATZ, RICHARD E DO NOT WRITE STEARNS WEAVER MILLER, ET AL 150 W FLAGLER ST, #2200 IN THIS SPACE MIAMI, FL 33130 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS DP TITLE NAME WEISER, WARREN STREET ADDRESS 2665 S BAYSHORE DR #1002 CITY-ST-ZIP MIAMI, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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:

STREET ADDRESS CITY-ST-ZIP

FILED

305-854-734 >