


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2008 8:00 am**  
**Secretary of State**

01-16-2008 90020 021 \*\*\*158.75

|  |   |   |   |   |  |
|--|---|---|---|---|--|
| <b>DOCUMENT # M40799</b><br>1. Entity Name<br><b>CONTINENTAL GENERAL DEVELOPMENT CORP.</b>   |   |   |   |  |  |
| Principal Place of Business<br><b>2307 DOUGLAS ROAD<br/>SUITE 500<br/>MIAMI, FL 33145</b>  |   |   | Mailing Address<br><b>2307 DOUGLAS ROAD<br/>SUITE 500<br/>MIAMI, FL 33145</b>                                       |   |  |
| 2. Principal Place of Business - No P.O. Box #<br><br>Suite, Apt. #, etc.  |   | 3. Mailing Address<br><br>- Suite, Apt. #, etc. |   |   |  |
| City & State<br><br>Zip      Country   |   | City & State<br><br>Zip      Country            |   | 4. FEI Number<br><b>65-0231019</b>  |  |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>   |   |   |   | Applied For<br>Not Applicable   |  |
| 6. Name and Address of Current Registered Agent<br><br><b>ALAYO, WILSON J<br/>2307 DOUGLAS ROAD<br/>SUITE 500<br/>MIAMI, FL 33145</b>  |   |   |   |   |  |
| 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> Zip Code   |   |   |   |   |  |
| 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 the obligations of registered agent.<br><br>SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)      DATE _____  |   |   |   |   |  |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2008 Fee will be \$550.00</b>  |   |   | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |   |  |
| <b>10. OFFICERS AND DIRECTORS</b>  |   |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.</b>   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | PSD<br>ALAYO, WILSON J<br>2307 DOUGLAS ROAD, SUITE 500<br>MIAMI, FL 33145 |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | DVP<br>Gema Alayo<br>2307 Douglas Road # 500<br>Miami, FL 33145                   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | DVP<br>ALAYO, JOSE<br>2307 DOUGLAS ROAD, SUITE 500<br>MIAMI, FL 33145     |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | Change    Addition  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | DVP<br>ALAYO, JUAN J<br>2307 DOUGLAS RD., STE. 500<br>MIAMI, FL 33145     |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | Change    Addition  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | Delete  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | Change    Addition  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | Delete  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | Change    Addition  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | Delete  |   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | Change    Addition  |  |
| 12. I hereby certify that the information supplied with this filing 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 file empowered. |   |   |   |   |  |
| <b>SIGNATURE:</b> _____<br>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  |   |   | Date: <b>1/4/08</b> Daytime Phone #: <b>305-445-9001</b>  |   |  |