# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 20, 2005**
**Secretary of State**

DOCUMENT# 372977

**Entity Name:** CONTINENTAL SERVICES GROUP, INC.

**Current Principal Place of Business:**

1300 NW 36TH STREET
P.O. BOX 420950
MIAMI, FL 332420950 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 420950
MIAMI, FL 332420950 US

**New Mailing Address:**

**FEI Number: 59-1307861** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NOSTRO, LOUIS ESQ
1500 MIAMI CNETER
201 S. BISCAYNE BLVD.
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: CEO ( ) Delete
Name: WHEELER, CHERYL D,
Address: 5101 ORDUNA DR
City-St-Zip: CORAL GABLES, FL

Title: PD ( ) Delete
Name: CAPIK, RICHARD W.,
Address: 1300 N.W. 36TH STREET
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition
Name: WHEELER, CHERYL D
Address: 5101 ORDUNA DR
City-St-Zip: CORAL GABLES, FL 33146

Title: PD (X) Change ( ) Addition
Name: CAPIK, RICHARD W
Address: 1300 N.W. 36TH STREET
City-St-Zip: MIAMI, FL 33142

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD W. CAPIK PD 04/20/2005

Electronic Signature of Signing Officer or Director — Date