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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9300001511

CONTINENTIAL AMERICAN DEVELOPMENT, INC.

FILED Mar 26 1998 8:00am Secretary of State



| CORRECTION: CONTINENTAL 60 | | | | | | | | |
|---|---|--|--|----------------------------|---|--|---------------------------|----------------|
| Principal Place of Business Mailing Address | | | | |) (MD114M 114M 184M 14111 MD131 MD131 MD131 MD111 | 1 40 ili 90101 jidal 61141 i | 0190 8 1 5101 3001 | |
| 1784 SAN DIEGO AVENUE 1764 SAN DIEGO AVENUE | | | | | | | | |
| SAN DIEGO CA 92110 SAN DIEGO CA 92110 | | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | | 3. Date Incorporated or Qualified | IN THIS SPACE | |
| | | | | | | 03/19/1993 | | |
| 2. Principal P | lace of Business | 2a. Mailing Ad | dres s | | | 4. FEI Number | | Applied For |
| 21 | | 26 | | | | 95-3809144 | 1 | Not Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | #, etc. | | | 5. Certificate of Status Desired | \$8.75 | 5 Additional |
| 22 27 | | | | | | G. Continuate of States Desired | Fee | Required |
| City & State City & State | | | le | | | 6. Election Campaign Financing | | May Be |
| 23 | | | | Country | | Trust Fund Contribution | | d to Fees |
| 24 | | Zip 29 | | Country 30 | | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No | | _ · |
| 24] | | 25 29 30 Name and Address of Current Registered Agent | | · T | | 10. Name and Address of New Registered Agent | | |
| CO | RPORATION SERVICE CO | | ······································ | 81 | Name | 10, Wallie Bild Address of New Hey | ieralan wâgiir | |
| | HAYS STREET | Aldii Citti | | Ш | | | | |
| SUITE 105 | | | | 82 | Street Ac | dress (P.O. Box Number is Not Acceptable) | | |
| TAL | LAHASSEE FL 32301 | | | B3 | | | | |
| | | | | 84 | City | | FL 85 Zip | p Code |
| | | | | | | | | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | |
| SIGNATURE Signature, typic disciprosed facilità di applicable (NOTE: Registored Agent signature required when reinstating) DATE | | | | | | | | |
| 12. | Signature, typed or printed name of reg | ERS AND DIRECTORS | (NOTE: Register | <u>_</u> | it signature re | quired when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE | 2DC IN 42 |
| TITLE | VSD | · · · · · · · · · · · · · · · · · · · | | TITLE | T | ADDITIONS/CHANGES TO OFFICE | Change | |
| NAME | DUPREE, E S | _ | | NAME | | | onings | |
| STREET ADDRESS | 1764 SAN DIEGO AVE | | ■ | | ADDRESS | | | |
| CITY-ST-ZIP | SAN DIEGO CA | | | CITY-ST | 1 | | | |
| TITLE | CP | | | TITLE | *" | | ☐ Change | Addition |
| NAME | E PSTEIN, DANIEL J | | 2.24 | NAME | | | | _ |
| STREET ADDRESS | 1764 SAN DIEGO AVE | NUE | 2.3 5 | STREET A | DDRESS | | | |
| CITY-ST-ZIP | SAN DIEGO CA | | | CITY-SI | 1 | | | |
| TITLE | VO | | | TITLE | | | ☐ Change | Addition |
| NAME | SVATOS, ROBERT J | | 3.21 | NAME | | | _ • | |
| STREET ADDRESS | 1764 SAN DIEGO AVE | NUE | 3.3 9 | STREET A | DDAESS | | | |
| CITY - \$T - ZIP | SAN DIEGO CA | | | CITY-ST | 1 | | | |
| TITLE | V | | | TITLE | | | ☐ Change | Addition |
| NAME | FORRESTER, BRADLE | | 4. 2 | NAME | | | | |
| STREET ADDRESS | 1764 SAN DIEGO AVE | | 4.3 9 | STREET A | DDRESS | | | ľ |
| CITY-ST-ZIP | SAN DIEGO CA | | | CITY-ST | - ŽIP | | | |
| TITLE | V | | DELETE 5.11 | TITLE | | 50000246 | ∃ ⊒ ∰ehange | Addition |
| NAME | TILLEY, RALPH | | 5.2 ≱ | NAME | | - 03 /26/9801051 | 7021 | |
| STREET ADDRESS | 1764 SAN DIEGO AVE | | 5.3 \$ | STREET A | DORESS | ***150.00 | | |
| CITY-ST-ZIP | SAN DIEGO CA | | | CITY-ST- | ZIP | | | |
| TITLE | | | DELETE 6.1 T | TITLE | | | Change | LZ Akation |
| NAME | | | 6.2 N | NAME | ! | | つ | 2000 |
| STREET ADDRESS | | | 6.3 5 | STREET A | DDRESS | | 2 | Λ |
| CITY-ST-ZIP | | | 6.4 0 | CITY-ST- | ZIP | | <i>\</i> | |

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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 il changed, or on architecth and leaves.