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Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # J91180

(6)

1. Corporation Name

INVERSIONES CONTINENTAL U.S.A. CORP.

Principal Place of Business

APARTADO #390  
SAN PEDRO SULA  
HONDURAS, C.A.

Mailing Address

% LUNDY & SHACTER, P.A.  
150 N.W. 168th ST.  
SUITE 300  
N. MIAMI BEACH, FL 33169

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/08/1987

4. FEI Number

65-0018270

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORP. INFORMATION SERVICES, INC.  
1201 HAYES STREET  
TALLAHASSEE, FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1506, 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 607.0605, Florida Statutes.

SIGNATURE

Signature of the person who is authorized to execute this statement

(Initials of Registered Agent required when not stated)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PD	ROSENTHAL, JAIME	POST OFFICE BOX 390	SAN PEDRO SULA, HONDURAS C.A.	<input checked="" type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14 TITLE	15 NAME	16 STREET ADDRESS	17 CITY - ST - ZIP	18 TITLE	19 NAME	20 STREET ADDRESS	21 CITY - ST - ZIP	22 TITLE	23 NAME	24 STREET ADDRESS	25 CITY - ST - ZIP	26 TITLE	27 NAME	28 STREET ADDRESS	29 CITY - ST - ZIP	30 TITLE	31 NAME	32 STREET ADDRESS	33 CITY - ST - ZIP	34 TITLE	35 NAME	36 STREET ADDRESS	37 CITY - ST - ZIP	38 TITLE	39 NAME	40 STREET ADDRESS	41 CITY - ST - ZIP	42 TITLE	43 NAME	44 STREET ADDRESS	45 CITY - ST - ZIP	46 TITLE	47 NAME	48 STREET ADDRESS	49 CITY - ST - ZIP	50 TITLE	51 NAME	52 STREET ADDRESS	53 CITY - ST - ZIP	54 TITLE	55 NAME	56 STREET ADDRESS	57 CITY - ST - ZIP	58 TITLE	59 NAME	60 STREET ADDRESS	61 CITY - ST - ZIP	62 TITLE	63 NAME	64 STREET ADDRESS	65 CITY - ST - ZIP	66 TITLE	67 NAME	68 STREET ADDRESS	69 CITY - ST - ZIP	70 TITLE	71 NAME	72 STREET ADDRESS	73 CITY - ST - ZIP	74 TITLE	75 NAME	76 STREET ADDRESS	77 CITY - ST - ZIP	78 TITLE	79 NAME	80 STREET ADDRESS	81 CITY - ST - ZIP	82 TITLE	83 NAME	84 STREET ADDRESS	85 CITY - ST - ZIP	86 TITLE	87 NAME	88 STREET ADDRESS	89 CITY - ST - ZIP	90 TITLE	91 NAME	92 STREET ADDRESS	93 CITY - ST - ZIP	94 TITLE	95 NAME	96 STREET ADDRESS	97 CITY - ST - ZIP	98 TITLE	99 NAME	100 STREET ADDRESS	101 CITY - ST - ZIP	102 TITLE	103 NAME	104 STREET ADDRESS	105 CITY - ST - ZIP	106 TITLE	107 NAME	108 STREET ADDRESS	109 CITY - ST - ZIP	110 TITLE	111 NAME	112 STREET ADDRESS	113 CITY - ST - ZIP	114 TITLE	115 NAME	116 STREET ADDRESS	117 CITY - ST - ZIP	118 TITLE	119 NAME	120 STREET ADDRESS	121 CITY - ST - ZIP	122 TITLE	123 NAME	124 STREET ADDRESS	125 CITY - ST - ZIP	126 TITLE	127 NAME	128 STREET ADDRESS	129 CITY - ST - ZIP	130 TITLE	131 NAME	132 STREET ADDRESS	133 CITY - ST - ZIP	134 TITLE	135 NAME	136 STREET ADDRESS	137 CITY - ST - ZIP	138 TITLE	139 NAME	140 STREET ADDRESS	141 CITY - ST - ZIP	142 TITLE	143 NAME	144 STREET ADDRESS	145 CITY - ST - ZIP	146 TITLE	147 NAME	148 STREET ADDRESS	149 CITY - ST - ZIP	150 TITLE	151 NAME	152 STREET ADDRESS	153 CITY - ST - ZIP	154 TITLE	155 NAME	156 STREET ADDRESS	157 CITY - ST - ZIP	158 TITLE	159 NAME	160 STREET ADDRESS	161 CITY - ST - ZIP	162 TITLE	163 NAME	164 STREET ADDRESS	165 CITY - ST - ZIP	166 TITLE	167 NAME	168 STREET ADDRESS	169 CITY - ST - ZIP	170 TITLE	171 NAME	172 STREET ADDRESS	173 CITY - ST - ZIP	174 TITLE	175 NAME	176 STREET ADDRESS	177 CITY - ST - ZIP	178 TITLE	179 NAME	180 STREET ADDRESS	181 CITY - ST - ZIP	182 TITLE	183 NAME	184 STREET ADDRESS	185 CITY - ST - ZIP	186 TITLE	187 NAME	188 STREET ADDRESS	189 CITY - ST - ZIP	190 TITLE	191 NAME	192 STREET ADDRESS	193 CITY - ST - ZIP	194 TITLE	195 NAME	196 STREET ADDRESS	197 CITY - ST - ZIP	198 TITLE	199 NAME	200 STREET ADDRESS	201 CITY - ST - ZIP	202 TITLE	203 NAME	204 STREET ADDRESS	205 CITY - ST - ZIP	206 TITLE	207 NAME	208 STREET ADDRESS	209 CITY - ST - ZIP	210 TITLE	211 NAME	212 STREET ADDRESS	213 CITY - ST - ZIP	214 TITLE	215 NAME	216 STREET ADDRESS	217 CITY - ST - ZIP	218 TITLE	219 NAME	220 STREET ADDRESS	221 CITY - ST - ZIP	222 TITLE	223 NAME	224 STREET ADDRESS	225 CITY - ST - ZIP	226 TITLE	227 NAME	228 STREET ADDRESS	229 CITY - ST - ZIP	230 TITLE	231 NAME	232 STREET ADDRESS	233 CITY - 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**LUNDY & SHACTER, P.A.**

CERTIFIED PUBLIC ACCOUNTANTS

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Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

July 15, 1998

Re: Delinquent Annual Reports

Dear Sir or Madam;

As a courtesy to our clients who wish to keep their corporations alive, we periodically monitor the filing records, to see that their Annual report has been filed.

The following corporation, as of June 30th, had not filed. When I inquired with this client they said that they had not received their forms, but they *did* wish to file; and asked us to prepare the reports on blank forms.

Inversiones Continental U.S.A. Corp.

This was an unavoidable and unintentional late filing (for the record, we have 300-400 corporate clients that did file on a timely basis). We will continue to inquire with our clients about the status of their filings. Accordingly, we respectfully request that you accept the enclosed returns without the assessment of a late filing penalty.

Very Truly Yours,  
LUNDY & SHACTER, P.A.  
Certified Public Accountants

  
RICHARD LUNDY