FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L89720 (1)

1. CORPORATE NAME
CONTINUE WOOD, INC.

Principal Place of Business
2720 CORAL WAY
MIAMI FL 33145-0271

Mailing Address
2720 CORAL WAY
MIAMI FL 33145-0271

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/27/1990
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite Apt. # — 22
Suite Apt. # — 27
City & State — 23
City & State — 28
24 25 29 30

4. FEI Number: 65-0222267 — 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. The corporation has ability to charge for under 3 Year Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
SCHLOSBERG, DAVID I., ESQ.
2720 CORAL WAY
3RD FLOOR
MIAMI FL 33145-0271

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to Florida Statutes 607.0505 and 607.0506 Florida Statutes, the undersigned corporation submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The character of business of the corporation is found on file. Having accepted the appointment as registered agent, I am familiar with and accept the obligations of Section 607.0505 Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	G	TITLE	D — [X] Change [ ] Addition
NAME	FELDMAN, MYER	NAME	
STREET ADDRESS	10608 STAPLEFORD HALL DR	STREET ADDRESS	
CITY, ST, ZIP	POTOMAC MD	CITY, ST, ZIP	
TITLE	PD	TITLE	[ ] Change [ ] Addition
NAME	HEFFERNAN, WILLIAM, J	NAME	
STREET ADDRESS	351 NE 105TH ST	STREET ADDRESS	
CITY, ST, ZIP	MIAMI SHORES FL	CITY, ST, ZIP	
TITLE	T	TITLE	[ ] Change [ ] Addition
NAME	VIDAL, HECTOR O	NAME	
STREET ADDRESS	2720 CORAL WAY	STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	CITY, ST, ZIP	
TITLE	EVD	TITLE	[ ] Change [ ] Addition
NAME	DE ARMAS, JORGE, B	NAME	
STREET ADDRESS	8529 133RD PLACE	STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	CITY, ST, ZIP	
TITLE	SVD	TITLE	[ ] Change [ ] Addition
NAME	CARVALLO, JORGE, N	NAME	
STREET ADDRESS	9756 SW 1ST TERR	STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	CITY, ST, ZIP	
TITLE	D	TITLE	CD — [X] Change [ ] Addition
NAME	ARSHT FELDMAN, ADRIENNE	NAME	
STREET ADDRESS	10608 STAPLEFORD HALL DR	STREET ADDRESS	
CITY, ST, ZIP	POTOMAC MD	CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is substantially furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of changed or new additions with an address.

SIGNATURE: 04/28/95 (305) 448-6500
DATE — DAYTIME PHONE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM J. HEFFERNAN, PRESIDENT/DIRECTOR

0180267 CP