File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FILED SECRETARY OF STATE FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris ANNUAL REPORT DIVISION OF CORPORATIONS Secretary of State 1999 DIVISION OF CORPORATIONS 99 APR 22 PM 2: 07 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE **DOCUMENT** # 197000001298 CONTINENTAL STRATEGISTS LC 1a. Principal Place of Business Address 4521 PGA BOULEVARD, +211 4521 PGA BOULEVARD, #211 PALM DEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418 3. Date Organized or Qualified 2 Principal Place of Business 2a. Mailing Address 3a. State of Formation 1220 N. Market St. 1220 N. Market St. 11/17/1997 FLSuite, Apt. #, etc. 4. FEI Number Suite 606 Suite 606 Applied For City & State City & State Not Applicable Wilmington, DE 19801 Wilmington, DE 19801 5. Date of Last Report 6. Certificate of Status Desired Country 03/09/1998 \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office CORPORATE CREATIONS ENTERPRISES, INC. 4521 PGA BLVD., #211 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH GARDENS FL 33418 Suite Apt #, elc 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above named limited liability company submits this statement for the surpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations SIGNATURE ___ DATE (REspirated Agent Accepting Appearance) (Really Residence I Agentic graties in proclams to a 10. Trile Managing Members/Managers **Business Street Address** City, State and Zip Code CROSHAW, PHILIP MARK MGR THE AVENUE SARK, CHANNELS ISLAN MGR GRASSICK, JAMES WILLIA LA COLLINETTE SARK CHANNEL ISLANDS 000002853140~~& -04/27/33--01052--004 11. I do 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 is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address. Janet M. Corshaw, mgr

SIGNATURE:

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