

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 OCT 28 PM 5:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000072974

1. Corporation Name

CONTINENTAL EUROPEAN, INC.

Principal Place of Business

2423 NE 9TH STREET  
APT 112  
HALLANDALE FL 33009

Mailing Address

2423 NE 9TH STREET  
APT 112  
HALLANDALE FL 33009

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

8701 Collins ave  
Miami Beach FL.  
City & State

3. New Mailing Office Address, If Applicable

2423 NE 9th Street  
Suite, Apt. #, etc.  
Hallandale FL 33009  
City & State

4. Date Incorporated or Qualified  
To Do Business in Florida

07/25/2001

5. FEI Number

65-1135646

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PVST	ANTONOV, IGOR	18555 COLLINS AVENUE	SUNNY ISLES BEACH FL 32160
D	ANTONOV, IGOR	18555 COLLINS AVENUE	SUNNY ISLES BEACH FL 32160
PVST	ANTONOV, IGOR	2423 NE 9th Street	Hallandale FL 33009
D	ANTONOV, IGOR	2423 NE 9th Street	Hallandale FL 33009
			400008635024 10/29/02 01112-007 **158.75

8. Name and Address of Current Registered Agent

TERMINELLO, LOUIS J ESQ  
TERMINELLO & TERMINELLO, P.A.  
2700 SW 37TH AVENUE  
MIAMI FL 33133

9. Name and Address of New Registered Agent

Name LAW OFFICES OF MASHA K. BACH P.A.  
Street Address (P.O. Box Number is Not Acceptable)  
17768 MAPLEWOOD DR.  
Suite, Apt. #, Etc.  
BOCA RATON  
City  
State FL Zip Code 33487

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date 10/23/2002

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/23/2002 954 4550781

Date Daytime Phone #

CR2E040 (8/02)

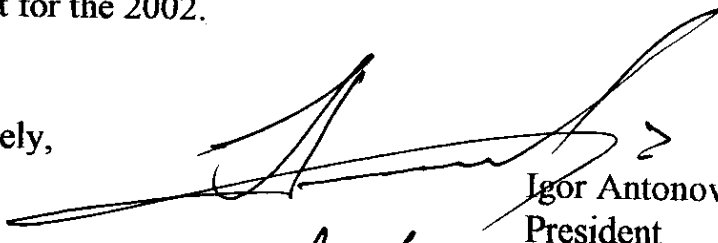
# CONTINENTAL EUROPEAN, INC.

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To whom it may concern:

This is to notify you that CONTINENTAL EUROPEAN Inc (18555 Collins ave. Sunny Isles Beach, Fl 33160) did not receive the annual Report for the 2002.

Sincerely,



Igor Antonov  
President

10/23/02