

2005 FOR PROFIT CORPORATION ANNUAL REPORT


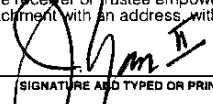
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Secretary of State

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01102005 Chg-P CR2E034 (10/03)

DOCUMENT # P04000019713			
1. Entity Name CONTINENTAL INDUSTRIAL RESOURCE CORPORATION			
Principal Place of Business 114 JUNIPER LANE LONGWOOD, FL 32779		Mailing Address 114 JUNIPER LANE LONGWOOD, FL 32779	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
RYAN, JAMES S II 114 JUNIPER LANE LONGWOOD, FL 32779		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE		DATE	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AZAD, YOUSEF S 713 CERVANTES CT. EL PASO, TX 79922 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT JOHN W. GRAY, II 3901 JANITELL RD. COLORADO SPRINGS CO 80906 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARGOUTI, MUNZER 34 SUDQI ABU SHAQRA ST. AMMAN, JORDAN, <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT AISHA ABDUL-ALI 626 PRICE AVENUE DURHAM, N.C. 27701 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AZAD, MOHSEN S 713 CERVANTES CT. EL PASO, TX 79922 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY/TREASURER JAMES S. RYAN II 114 JUNIPER LANE LONGWOOD, FLORIDA 32779 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AZAD, KAYVAN S 713 CERVANTES CT. EL PASO, TX 79922 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR RICHARD F. QUIGLEY 507 DORSET CIRCLE SOUTH DAYTONA, FL 32119 <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAY, JOHN 3901 JANITELL RD. COLORADO SPRINGS, CO 80906 <input type="checkbox"/> Delete (SEE CHANGES)	TITLE NAME STREET ADDRESS CITY-ST-ZIP	N/A <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RYAN, JAMES S II 114 JUNIPER LANE LONGWOOD, FL 32779 <input type="checkbox"/> Delete (SEE CHANGES)	TITLE NAME STREET ADDRESS CITY-ST-ZIP	N/A <input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		JAMES S. RYAN, II	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: 2/16/05 Daytime Phone #: (407) 788-2264	