2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000014270

Address:

City-St-Zip:

Entity Name: VENVEST CONTINENTAL, INC.

FILED Apr 28, 2006 Secretary of State

That is the second of the seco						
Current Princip	of Business:	New Prince	New Principal Place of Business:			
2 N. TAMIAMI TRAIL SUITE 806 SARASOTA, FL 34236			SUITE 806	%CLOCKWORK, 2 N. TAMIAMI TRAIL SUITE 806 SARASOTA, FL 34236		
Current Mailing Address:			New Maili	New Mailing Address:		
2 N. TAMIAMI TRAIL SUITE 806 SARASOTA, FL 34236			SUITE 806	%CLOCKWORK, 2 N. TAMIAMI TRAIL SUITE 806 SARASOTA, FL 34236		
FEI Number: 20-22	40166	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:		
LONG, ARTHUR J 2 N. TAMIAMI TRAIL SUITE 806 SARASOTA, FL 34236 US			515 EAST	CORPDIRECT AGENTS, INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 US		
The above name in the State of FI		ubmits this statement for the po	urpose of changing	its registered	office or registered agent, or both,	
SIGNATURE: ED LARY				04/28/2006		
_	Electronic	Signature of Registered Age	nt		Date	
Election Campaign	n Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	ABRAMS, JAI	TRAIL, SUITE 806	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	ABRAMS, JAI	TRAIL, SUITE 806	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	BECKMANN,	TRAIL, SUITE 506	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	MYERS, PAT	TRAIL, SUITE 806	
Title: Name:	1()	Delete	Title: Name:	V (STEWART, J) Change (X) Addition EFFREY D	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

2 N. TAMIAMI TRAIL, SUITE 506

SARASOTA, FL 34236

SIGNATURE: ROBERT F. BECKMANN, SECRETARY S 04/28/2006