## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P37694

City-St-Zip:

NEW YORK, NY 10016

Entity Name: LORDHILL CONTINENTAL CORP

FILED Sep 20, 2004 Secretary of State

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Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
C/O MALMART GOLDMAN 152 WEST 57TH STREET NEW YORK, NY 10019			152 WEST 57TH S	C/O MALMAN GOLDMAN 152 WEST 57TH STREET NEW YORK, NY 10019	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
C/O MALMART GOLDMAN 152 WEST 57TH STREET NEW YORK, NY 10019			152 WEST 57TH S	C/O MALMAN GOLDMAN 152 WEST 57TH STREET NEW YORK, NY 10019	
FEI Number:	88-0281262	FEI Number Applied For ( )	FEI Number Not Applicable (	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 US					
The above in the State	named entity s e of Florida.	submits this statement for the p	ourpose of changing its regist	ered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
Election Can	npaign Financing	g Trust Fund Contribution ( ).			
OFFICERS	S AND DIREC	TORS:	ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PDEV () MALMAN, ARTH 152 WEST 57T NEW YORK, N	H STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () MALMAN, ARTH 152 W 57TH ST NEW YORK, N	reet	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address:	DVPT () MAJOR, MARTI 211 EAST 38 S		Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: ARTHUR B.MALMAN PRES 09/20/2004