FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
May 13 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000003351 (9)**

1. Corporation Name
CONTINENTAL TRANSPORTATION COMPANY

Principal Place of Business	Mailing Address
2514 ALBACA DRIVE **ORLANDO FL 32837**	**2514 ALBACA DRIVE** **ORLANDO FL 32837-6519**

3. Date Incorporated or Qualified: **01/08/1996**
3a. Date of Last Report: N/A

2. Principal Place of Business	2a. Mailing Address
21 5850 Lakehurst Dr.	26 2514 Albaca Dr
Suite, Apt. #, etc. 22 Suit 270-4	Suite, Apt. #, etc. 27
City & State 23 Orlando, Fl.	City & State 28 Orlando, Fl
Zip 24 32819 Country 25 USA	Zip 29 32837 Country 30

4. FEI Number: 59-3362830 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GONZALEZ, CESAR
2514 ALBACA DRIVE
ORLANDO FL 32837

10. Name and Address of New Registered Agent

81 Name: Cesar Gonzalez
82 Street Address (P.O. Box Number is Not Acceptable): 2514 Albaca Dr.
83
84 City: Orlando FL 85 Zip Code: 32837

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Cesar Gonzalez Cesar Gonzalez President. 4-30-97
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE	A, D	☒ Change ☒ Addition
NAME	GONZALEZ, CESAR		1.2 NAME	William Gonzalez	
STREET ADDRESS	2514 ALBACA DRIVE		1.3 STREET ADDRESS	5712 Ridge Club Loop Apt 108	
CITY-ST-ZIP	ORLANDO FL 32837		1.4 CITY-ST-ZIP	Orlando, Fl 32839	
TITLE	D	☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	CEBALLOS, ORLANDO		2.2 NAME	Orlando Ceballos	
STREET ADDRESS	913 SAN RAFAEL WAY		2.3 STREET ADDRESS	5025 Warrior Lane	
CITY-ST-ZIP	KISSIMMEE FL 34758		2.4 CITY-ST-ZIP	Kissimmee Fl 34746	
TITLE	D	☒ DELETE	3.1 TITLE		☐ Change ☒ Addition
NAME	GUIRAN, FREDY		3.2 NAME	Jorge Valenzuela	
STREET ADDRESS	6713 VON BAMPUS DRIVE		3.3 STREET ADDRESS	P.O. Box 692711 N/A	
CITY-ST-ZIP	ORLANDO FL 32822		3.4 CITY-ST-ZIP	Orlando, Fl 32869-2711	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. 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 or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Cesar Gonzalez 4-30-97 (407)352-9996