


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90252 012 ***150.00

DOCUMENT # P97000050015	
1. Entity Name CONTINENTAL PROPERTIES ACQUISITION CORPORATION	

Principal Place of Business 2665 S. BAYSHORE DR. #1102 MIAMI, FL 33133 CORAL GABLES, FL 33134	Mailing Address 2121 PONCE DE LEON BLVD 2665 S. BAYSHORE DR. #1002 #1250 MIAMI, FL 33133 CORAL GABLES, FL 33134
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04262006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0768033	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SCHATZ, RICHARD E 2200 MUSEUM TOWER, 150 W. FLAGLER ST. MIAMI, FL 33130
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**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISER, WARREN P 2665 S BAYSHORE DR #1002 MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROOKS, CAROL G 2665 S BAYSHORE DR #1002 MIAMI, FL 33133
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: WARREN P. WEISER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/06
Date

305-824-7342
Daytime Phone #