

DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE FOOD AND DRUG ADMINISTRATION BLOOD ESTABLISHMENT REGISTRATION AND PRODUCT LISTING FOR MANUFACTURERS OF BLOOD PRODUCTS AND LICENSED DEVICES	FEI: 1047134 DUNS: 926205279 U.S. License Number: 439	REASON FOR SUBMISSION Annual Registration	DISTRICT OFFICE: Florida VALIDATED BY FDA: 11/20/2018
LEGAL NAME AND LOCATION: Continental Services Group, Inc. 2901 West Broward Boulevard Ft. Lauderdale, FL 33312 USA 954-327-0809	REPORTING OFFICIAL: Cheryl Wheeler D. Capik Continental Services Group, Inc. P.O. Box 420-950 Miami, FL 33242-0950 USA 305-633-7700 x215 mail@continentalblood.com	U.S. AGENT:	
OTHER NAMES USED IN THIS LOCATION: Continental Blood Bank; Continental Blood Center	TYPE OF OWNERSHIP: CORPORATION DONOR/RECIPIENT RELATIONSHIP: ALLOGENIC	ESTABLISHMENT TYPE: COLLECTION FACILITY; COMMUNITY (NON-HOSPITAL) BLOOD BANK; PLASMAPHERESIS CENTER	

PRODUCT	COLLECT	MANUAL APHERESIS	AUTOMATED APHERESIS	PREPARE	LEUKOCYTES REDUCED	IRRADIATED	DONOR RETESTED	TEST	STORE AND DISTRIBUTE TO OTHERS	BACTERIAL TESTING	PATHOGEN REDUCED	POOLED
WHOLE BLOOD	X								X			
RED BLOOD CELLS (RBC)				X					X			
GRANULOCYTES				X					X			
SOURCE LEUKOCYTES			X	X					X			
SOURCE PLASMA			X						X			
RECOVERED PLASMA				X					X			
BLOOD PRODUCTS FOR DIAGNOSTIC USE	X			X					X			

***** End Of Report *****