


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # F03000004334 1. Entity Name CASHEW HOLDINGS, INC.	
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Principal Place of Business CARTOON CUTS 5501 BACKLICK RD. STE. 118 SPRINGFIELD, VA 22151	Mailing Address CARTOON CUTS 5501 BACKLICK RD. STE. 118 SPRINGFIELD, VA 22151
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01142004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 54-1560446	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

**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 _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

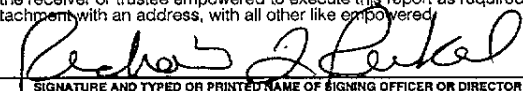
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	C PERKAL, RICHARD 5501 BACKLICK RD. STE. 118 SPRINGFIELD, VA 22151
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V PERKAL, KATHLEEN 5501 BACKLICK RD. STE. 118 SPRINGFIELD, VA 22151
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SALVAT, JORGE 5501 BACKLICK RD. STE. 118 SPRINGFIELD, VA 22151
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HAWLEY, COLEEN 5501 BACKLICK RD. STE. 118 SPRINGFIELD, VA 22151
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**DO NOT WRITE
IN THIS SPACE**

12. I 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 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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-04 2122721305
Date Daytime Phone #