## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000115690

FILED Apr 19, 2006 Secretary of State

Entity Name: CABRAL BUILDING AND CONSTRUCTION MANAGEMENT INC.

**Current Principal Place of Business: New Principal Place of Business:** 4810 EUROPA DRIVE NAPLES, FL 34105 **Current Mailing Address: New Mailing Address:** P.O. BOX 9368 4810 EUROPA DR. NAPLES, FL 34101 NAPLES, FL 34105 FEI Number: 20-0328930 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CABRAL, COREY 4810 EUROPA DRIVE NAPLES, FL 34105 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition CABRAL, COREY CABRAL, COREY Name: Name: P.O. BOX 9368 4810 EUROPA DR Address: Address: City-St-Zip: NAPLES, FL 34101 City-St-Zip: NAPLES, FL 34105 Title: Title: ( ) Delete (X) Change ( ) Addition Name: BAKER, DELBERT Name: CABRAL, COREY P.O. BOX 9368 4810 EUROPA DR. Address: Address: NAPLES, FL 34105 NAPLES, FL 34101 City-St-Zip: City-St-Zip: Title: (X) Change ( ) Addition () Delete Title: JACQUEE, KRAUSE JACQUEE, KRAUSE Name: Name: P.O. BOX 9368 4810 EUROPA DR. Address: Address: City-St-Zip: NAPLES, FL 34101 City-St-Zip: NAPLES, FL 34105 Title: () Delete Title: (X) Change ( ) Addition COREY, CABRAL COREY, CABRAL Name: Name: Address: P.O. BOX 9368 Address: 4810 EUROPA DR. City-St-Zip: NAPLES, FL 34101 City-St-Zip: NAPLES, FL 34105 Title: Title: (X) Change ( ) Addition ( ) Delete BETZ, GARY Name: Name: CABRAL, COREY P.O. BOX 9368 Address: 4810 EUROPA DR. Address: City-St-Zip: NAPLES, FL 34101 City-St-Zip: NAPLES, FL 34105

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

SIGNATURE: COREY CABRAL PRES 04/19/2006