

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000049613

Entity Name: T&B INTERNATIONAL, INC.

FILED
Jan 08, 2004
Secretary of State

Current Principal Place of Business:

660 MCCUE RD
LAKELAND, FL 338153280 US

New Principal Place of Business:

Current Mailing Address:

660 MCCUE RD
LAKELAND, FL 338153280 US

New Mailing Address:

FEI Number: 58-2063222

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBSON, RICHARD
501 E KENNEDY BLVD
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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:

Title: PSTD () Delete
Name: REFAE, BADR
Address: 660 MCCUE RD
City-St-Zip: LAKELAND, FL 338153280

Title: D () Delete
Name: REFAE, THABIT
Address: 660 MCCUE RD
City-St-Zip: LAKELAND, FL 338153280

Title: AS () Delete
Name: JACOBSON, RICHARD
Address: 501 E. KENNEDY BLVD SUITE 1700
City-St-Zip: TAMPA, FL 33602

Title: V (X) Delete
Name: HOUSTON, RUSSELL
Address: 660 MCCUE RD.
City-St-Zip: LAKELAND, FL 338153280

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BADR REFAE

PSTD

01/08/2004

Electronic Signature of Signing Officer or Director

_____ Date