


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000024464	
1. Entity Name C & B CATRAL CORPORATION	

Principal Place of Business 2621 SE LAKE WEIR AVE OCALA, FL 34471	Mailing Address 2621 SE LAKE WEIR AVE OCALA, FL 34471
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04272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3288075	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

CATRAL, BEATRIZ L
3580 SE 26 AVENUE
OCALA, FL 34471

**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 *Beatriz L. Catral*

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

(NOTE: Registered Agent signature required when reinstating)

4/27/04
DATE

**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

U000000154454
05/04/04-80167-024 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WOODY, JAMES MATHEW
STREET ADDRESS	230 21ST ST
CITY-ST-ZIP	DUNBAR, WV 25064
TITLE	PCD
NAME	CATRAL, BEATRIZ L
STREET ADDRESS	3580 SE 26 AVENUE
CITY-ST-ZIP	OCALA, FL 34471
TITLE	D
NAME	CATRAL-WOODY, ROSADALIE
STREET ADDRESS	230 21ST ST
CITY-ST-ZIP	DUNBAR, WV 25064
TITLE	D
NAME	CATRAL, GUILLERMO L
STREET ADDRESS	13034 PRAIRIE MEADOW DR
CITY-ST-ZIP	ORLANDO, FL 32837
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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)(f), 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: *Beatriz L. Catral* BEATRIZ L. CATRAL 4/27/04 352-369-0770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #