

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 22, 2005 8:00 am
Secretary of State

07-22-2005 90022 006 ***150.00

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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

00007133



06302005 No Chg-P .CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3288075
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CATRAL, BEATRIZ L
~~3580 SE 26 AVENUE~~ 2917 SE 22ND AVE
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 *X Beatriz L. Catral* PRESIDENT *X* 7/5/05
Signature of person to whom notice of registered office change is to be delivered. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005

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

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

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 2917 SE 22ND AVE
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 8727 COCO PLUM PLACE
CITY-ST-ZIP	ORLANDO, FL 32837 32827
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)(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: *X Beatriz L. Catral* *X* 7/5/05 *X 352-369-0770*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #