

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90235 003 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
--	--

DOCUMENT # P98000033797

1. Corporation Name

BOX COMPANY OF AMERICA, INC.

Principal Place of Business

123 NW 13 ST STE 313
BOCA RATON FL 33432

Mailing Address

123 NW 13 ST STE 313
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/1998

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

4. FEI Number

1187111111

☒ Applied For
☐ Not Applicable
5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

~~MORGENSTERN, CHARL~~
 123 NW 13 ST STE 313
 BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name Marcia Kirshner
 82 Street Address (P.O. Box Number is Not Acceptable)
 123 NW 13 Street
 83 Suite 313
 84 City Boca Raton FL 85 Zip Code 33432

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME President
 STREET ADDRESS Fred Helser
 123 NW 13 St. Suite 313
 CITY-STATE-ZIP Boca Raton, FL 33432

TITLE ☐ DELETE

NAME Vice-President
 STREET ADDRESS Ted Tesser
 123 NW 13 St. Suite 313
 CITY-STATE-ZIP Boca Raton, FL 33432

TITLE ☐ DELETE

NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
 STREET ADDRESS
 CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
 STREET ADDRESS
 CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with a different like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)