

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000075994

**Entity Name:** STUART ICE BOX, INC.

**Current Principal Place of Business:**

615 SE KRUEGER PKWY  
STUART, FL 34996

**Current Mailing Address:**

615 SE KRUEGER PKWY  
STUART, FL 34996

**FEI Number:** 65-0606962

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KRUEGER, WILLIAM W  
615 KRUEGER PARKWAY  
STUART, FL 34996 US

*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

**Officer/Director Detail :**

|                 |                     |                 |                        |
|-----------------|---------------------|-----------------|------------------------|
| Title           | D                   | Title           | VP                     |
| Name            | KRUEGER, WILLIAM W  | Name            | KRUEGER, WILLIAM W JR. |
| Address         | 615 KRUEGER PARKWAY | Address         | 615 SE KRUEGER PKWY    |
| City-State-Zip: | STUART FL 34996     | City-State-Zip: | STUART FL 34996        |

*I hereby 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 all other like empowered.*

**SIGNATURE:** WILLIAM W KRUEGER

**DIRECTOR**

**02/04/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date