

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000513397

**Entity Name:** ST PETE BOX LLC

**Current Principal Place of Business:**

6554 44TH STREET N STE 1011  
PINELLAS PARK, FL 33781

**Current Mailing Address:**

7418 34TH AVE N  
ST PETERSBURG, FL 33710 US

**FEI Number:** 92-1292113

**Certificate of Status Desired:** No

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

DICOSOLA, FRANCESCO  
6565 PARK BOULEVARD  
PINELLAS PARK, FL 33781 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

**Authorized Person(s) Detail :**

Title MGR  
Name DICOSOLA, SAVERIO  
Address 7418 34TH AVENUE NORTH  
City-State-Zip: ST PETERSBURG FL 33710

Title MGR  
Name DICOSOLA, NICHOLAS  
Address 7418 34TH AVENUE NORTH  
City-State-Zip: ST PETERSBURG FL 33710

Title MGR  
Name DICOSOLA, MAUREEN  
Address 7418 34TH AVENUE NORTH  
City-State-Zip: SAINT PETERSBURG FL 33710

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MAUREEN DICOSOLA

**MANAGER**

**03/19/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date