

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F21000003322

Entity Name: LABELBOX, INC.**Current Principal Place of Business:**510 TREAT AVE.
SAN FRANCISCO, CA 94110**Current Mailing Address:**510 TREAT AVE.
SAN FRANCISCO, CA 94110 US**FEI Number:** 82-4724328**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**INCORPORATING SERVICES, LTD.
1540 GLENWAY DR.
TALLAHASSEE, FL 32301 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	DS
Name	SHARMA, MANU
Address	510 TREAT AVE.
City-State-Zip:	SAN FRANCISCO CA 94110

Title	CEO
Name	SHARMA, MANU
Address	510 TREAT AVE.
City-State-Zip:	SAN FRANCISCO CA 94110

Title	D
Name	PATTERSON, ANNA
Address	510 TREAT AVE.
City-State-Zip:	SAN FRANCISCO CA 94110

Title	D
Name	GOPINATH, RASHMI
Address	510 TREAT AVE.
City-State-Zip:	SAN FRANCISCO CA 94110

Title	PD
Name	RIEGER, BRIAN
Address	510 TREAT AVE.
City-State-Zip:	SAN FRANCISCO CA 94110

Title	COO
Name	RIEGER, BRIAN
Address	510 TREAT AVE.
City-State-Zip:	SAN FRANCISCO CA 94110

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: MANU SHARMA

CEO

02/01/2022

Electronic Signature of Signing Officer/Director Detail_____
Date