FILED
May 14, 2003 8:00 am
Secretary of State
04-24-2003 90217 023 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

4/.

DOCUMENT # P02000002484

1. Entity Name
Shell-Box Computers, Inc.
8067 Candlewoode Dr.
Largo, FL. 33773

DO NOT WRITE IN THIS SPACE

55040512

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
8067 Candlewoode Dr	8067 Candlewoode Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Largo, FL.	City & State: Largo, FL.
Zip: 33773 Country: USA	Zip: 33773 Country: USA

4. FEI Number: 61-140 2290 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: William Stetler

Street Address (P.O. Box Number is Not Acceptable): 8067 Candlewoode Dr

City: Largo FL Zip Code: 33773

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE: President NAME: William Stetler STREET ADDRESS: 8067 Candlewoode Dr. CITY-ST-ZIP: Largo, FL. 33773	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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CR2E034B (12/02)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: W. Hram Stetler 4/21/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #