## 2005 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P02000105300

Entity Name: LOK-BOX STORAGE, INC.

FILED Jan 10, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 801 LAKE SEBRING DRIVE 942 SR 17 NORTH SEBRING, FL 33870 SEBRING, FL 33870 **Current Mailing Address: New Mailing Address:** 801 LAKE SEBRING DRIVE 942 SR 17 NORTH SEBRING, FL 33870 SEBRING, FL 33870 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DISLER, MICHAEL M 329 SOUTH COMMERCE AVENUE SEBRING, FL 33870 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: MICHAEL M DISLER Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition SECOR, MICHAEL SECOR, MICHAEL Name: Name: P.O. BOX 1449 622 MARAVILLA AVE Address: Address: City-St-Zip: SEBRING, FL 33871 City-St-Zip: SEBRING, FL 33875 Title: Title: () Delete () Change () Addition Name: DISLER, MICHAEL M Name: 329 SOUTH COMMERCE AVENUE Address: Address: SEBRING, FL 33870 City-St-Zip: City-St-Zip: Title: Title: SD ( ) Delete () Change () Addition DISLER, MICHAEL M Name: Name: 329 SOUTH COMMERCE AVENUE Address: Address: City-St-Zip: SEBRING, FL 33870 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

Ρ SIGNATURE: MICHAEL SECOR 01/10/2005