2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000097280

Entity Name: BOX BOX INC

FILED Aug 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

 1865 BRICKELL AVE
 7741 NW 7ST

 APT. #1713
 APT # 515

MIAMI, FL 33129 US MIAMI, FL 33126 US

Current Mailing Address: New Mailing Address:

1865 BRICKELL AVE 7741 NW 7ST APT. #1713 APT # 515

MIAMI, FL 33129 US MIAMI, FL 33126 US

FEI Number: 20-1293598 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KABA CONSULTING INC

1307 RAIN FOREST LN

MINNEOLA, FL 34715 US

KABA CONSULTING INC

214 E WASHINGTON ST

SUITE A

MINNEOLA, FL 34715 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: ALEJANDRO KABA 08/29/2006

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: P () Delete Title: P (X) Change () Addition

 Name:
 CALDERON, SANDRA P
 Name:
 CALDERON, SANDRA P

 Address:
 1865 BRICKELL AVE APT 1713
 Address:
 7741 NW 7ST APT # 515

 City-St-Zip:
 MIAMI, FL 33129
 City-St-Zip:
 MIAMI, FL 33126

Title: SEC () Delete Title: () Change () Addition

 Name:
 RAMIRO, ARENAS I
 Name:

 Address:
 739 NW 170 TERRACE
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33028 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

SIGNATURE: SANDRA PAOLA CALDERON P 08/29/2006