2008 FOR PROFIT CORPORATION

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ANNUAL REPORT					Apr 11, 2008 08:			
DOCUMENT # P06000066375 1. Entity Name CELL BOXER, INC.						Secreta	ry of St	
Principal Place 1130 CHENI UNIT D TITUSVILLE,		Mailing Address 1130 CHENEY HIGHWAY UNIT D TITUSVILLE, FL 32780						
_	NOT WOLL	IN THIC COA	^	04082008	No Chg-P	CR2E034 (11		
L	O NOT WRITE	IN IIIIO SPA	CE	4. FEI Numbe 11-377	9737	_ \$8.7F	Applied For Not Applicable Additional	
	- N			5. Certificate	of Status Desired	Fee Re		
UNIT D	6. Name and Address of Current Re CELSO ENEY HIGHWAY LE, FL 32780	jistered Agent		300 X W	NOT W THIS SE			
8. The above the obligat	e named entity submits this statement for the close of registered agent Signature, typed or printed name of registered agent and		red office or register		h, in the State of Flo	orida. ↓ am familiar	with, and accept	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Fina Trust Fund Contribution.		00 May Be ed to Fees	U0000 04/23/08)0833059 3-80090-01:	- 0 150.00	
10.	OFFICERS AND DIF	RECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD DIGIROLAMO, THOM 1130 UNIT D CHENEY HIGHWAY TITUSVILLE, FL 32780		-					
NAME STREET ADDRESS CITY-ST-ZIP	PEREIRA, CELSO 1130 UNIT D CHENEY HIGHWAY TITUSVILLE, FL 32780	· 5	-					
NAME STREET ADDRESS CITY-ST-ZIP	PEREIRA, CELSO 1130 UNIT D CHENEY HIGHWAY TITUSVILLE, FL 32780	,		- DO	NOT W	RITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				F MI	THIS SP	ACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME STREET ADDRESS								

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address. On the property of the corporation of the receiver of the property of the corporation of the receiver of the property of the corporation of the receiver of the property of the corporation of the receiver of the property of the corporation of the receiver of the property of the corporation of the receiver of the property of the corporation of the receiver of the property of the corporation of the receiver of the property of the property of the corporation of the receiver of the corporation of the receiver of the property of

SIGNATURE: Month

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #