

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 13 1998 8:00am
Secretary of State

DOCUMENT # P95000028206 (7)

1. Corporation Name

MICROBOX CORPORATION



Principal Place of Business

Mailing Address

1900 S HARBOR CITY BLVD
STE 209
MELBOURNE FL 32904-912
US

P O BOX 1328
MELBOURNE FL 32902-328
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/10/1995

4. FEI Number

59-3307213

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 2802 S. Fairway

Suite, Apt. #, etc.

22 City & State

23 Melbourne FL

Zip

Country

24 32901-6969

25 US

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Melbourne FL

Zip

Country

29 32902-1328

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAVID M PRESNICK
96 WILLARD ST
STE 302
COCOA FL 32922

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☐ DELETE

NAME FOUNTAIN, CYNTHIA
STREET ADDRESS 1900 S HARBOR CITY BLVD STE 209
CITY-ST-ZIP MELBOURNE FL

TITLE SDT ☐ DELETE

NAME FOUNTAIN, WAYNE H
STREET ADDRESS 1900 S HARBOR CITY BLVD STE 209
CITY-ST-ZIP MELBOURNE FL

TITLE D ☒ DELETE

NAME CUOMO, TOM
STREET ADDRESS 1900 S HARBOR CITY BLVD STE 209
CITY-ST-ZIP MELBOURNE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 2802 S. Fairway

1.4 CITY-ST-ZIP Melbourne FL 32901-6969

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 2802 S. Fairway

2.4 CITY-ST-ZIP Melbourne FL 32901-6969

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)