

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 13, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000096183

1. Entity Name
BOXCO OF PALM BEACH, INC.



Principal Place of Business
714 SE SEAHOUSE DR
PORT SAINT LUCIE, FL 34983

Mailing Address
11310 WILES ROAD
CORAL SPRINGS, FL 33076



07162004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
52-2198939

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

KALISZ, CHRISTOPHER C
714 SE SEAHOUSE DR.
PORT SAINT LUCIE, FL 34983

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IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

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

10. OFFICERS AND DIRECTORS

TITLE D
NAME KALISZ, CHRISTOPHER C
STREET ADDRESS 714 SE SEAHOUSE DR
CITY-ST-ZIP PORT SAINT LUCIE, FL 34983

U000000172198
09/13/04-80004-001 550.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

CHRISTOPHER C. KALISZ 9/07/04 301-252-5872
Date Daytime Phone #