

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000064971

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: PROFESSIONAL & RELIABLE ON-SITE SHREDDING, INC.

## Current Principal Place of Business:

13654 N 12TH STREET  
SUITE 11  
TAMPA, FL 33613 US

## New Principal Place of Business:

16047 PENWOOD DR.  
TAMPA, FL 33647 US

## Current Mailing Address:

P.O. BOX 47687  
TAMPA, FL 33647 US

## New Mailing Address:

FEI Number: 42-1597045      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

KITCHEN, JEREMY T  
16047 PENWOOD DR.  
TAMPA, FL 33647 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KITCHEN, JEREMY T  
Address: 16047 PENWOOD DRIVE  
City-St-Zip: TAMPA, FL 33647 US

Title: VP ( ) Delete  
Name: COX, DAVID R  
Address: 14304 HOMOSASSA  
City-St-Zip: TAMPA, FL 33613 US

Title: SEC ( ) Delete  
Name: KITCHEN, KENDRA L  
Address: 16047 PENWOOD DRIVE  
City-St-Zip: TAMPA, FL 33647 US

Title: TRES ( ) Delete  
Name: JEREMY, KITCHEN T  
Address: 16047 PENWOOD DRIVE  
City-St-Zip: TAMPA, FL 33647 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: KITCHEN, KENDRA L  
Address: 16047 PENWOOD DRIVE  
City-St-Zip: TAMPA, FL 33647 US

Title: VP (X) Change ( ) Addition  
Name: KITCHEN, JEREMY T  
Address: 16047 PENWOOD DR.  
City-St-Zip: TAMPA, FL 33647 US

Title: SEC (X) Change ( ) Addition  
Name: COX, DAVID R  
Address: 14304 HOMOSASSA  
City-St-Zip: TAMPA, FL 33613 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: KENDRA KITCHEN

P

04/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date