2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2008
Secretary of State

DOCUMENT# P03000090945

Entity Name: MICROSHRED, INC.

Current Principal Place of Business:

19593 NE 10TH AVE.
BLDG 4 BAY A&B
MIAMI, FL 33179

New Principal Place of Business:

Current Mailing Address:

19593 NE 10TH AVE.
BLDG 4 BAY A&B
MIAMI, FL 33179

New Mailing Address:

FEI Number: 35-2213198 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PREVITI, PETER ESQ
5825 SUNSET DR, STE 210
MIAMI, FL 33143 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-D ( ) Delete
Name: TSOHN, ROSEMARY
Address: 19593 NE 10TH AVE BLD 4 BAY A&B
City-St-Zip: MIAMI, FL 33179

Title: VP/D ( ) Delete
Name: TSOHN, AMI-HAI
Address: 19593 NE 10 AVE, BLDG4, BAY A& B
City-St-Zip: MIAMI, FL 33179

Title: V-P ( ) Delete
Name: SCHLAFLY, NIRA V
Address: 19593 NE 10 AVE., BLDG 4, BAY A&B
City-St-Zip: MIAMI, FL 33179

Title: VP ( ) Delete
Name: CIECHANOWIECKI, ORLY T
Address: 19593 NE 10 AVE, BLDG 4, BAY A&B
City-St-Zip: MIAMI, FL 33179

Title: VP ( ) Delete
Name: TSOHN, RINA
Address: 19593 NE 10 AVE, BLDG 4, BAY A & B
City-St-Zip: MIAMI, FL 33179

Title: VP ( ) Delete
Name: SCHLAFLY, JAMES
Address: 19593 NE 10 AVE, BLDG 4 BAY A & B
City-St-Zip: MIAMI, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change ( ) Addition
Name: SCHLAFLY, NIRA V
Address: 19593 NE 10 AVE., BLDG 4, BAY A&B
City-St-Zip: MIAMI, FL 33179

Title: VP (X) Change ( ) Addition
Name: CIECHANOWIECKI, ORLY
Address: 19593 NE 10 AVE, BLDG 4, BAY A&B
City-St-Zip: MIAMI, FL 33179

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

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: ROSEMARY TSOHN PRES 01/14/2008

Electronic Signature of Signing Officer or Director — Date