

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000012726

FILED
Feb 18, 2009
Secretary of State

Entity Name: TRANSAM DOCUMENT SHREDDING TWO INC

Current Principal Place of Business:

4563 MARIOTTI COURT
#101
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

4563 MARIOTTI COURT
#101
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 20-8324586

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, MICHAEL C
4563 MARIOTTI COURT
#101
SARASOTA, FL 34233 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: MARTIN, MICHAEL C
Address: 4563 MARIOTTI COURT, #101
City-St-Zip: SARASOTA, FL 34233 US

Title: VP () Delete
Name: MARTIN, PAULA K
Address: 4563 MARIOTTI COURT, #101
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: MARTIN, GRANT
Address: 8928 PHYLISS AVE
City-St-Zip: SARASOTA, FL 34231

Title: ST () Delete
Name: WAHL, KATHLEEN
Address: 8928 PHYLISS AVE
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: KATHLEEN WAHL

ST

02/18/2009

Electronic Signature of Signing Officer or Director

Date