

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000016192

FILED  
Jan 28, 2008  
Secretary of State

Entity Name: M & B SHREDDED PAPER & CONVERTERS, INC.

## Current Principal Place of Business:

10755 49TH STREET N.  
CLEARWATER, FL 33762

## New Principal Place of Business:

## Current Mailing Address:

10755 49TH STREET N.  
CLEARWATER, FL 33762

## New Mailing Address:

FEI Number: 59-3297898

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ADAMS, ANDREW J  
8440 43RD ST N  
PINELLAS PARK, FL 33781 US

## Name and Address of New Registered Agent:

ADAMS, ANDREW J  
10755 49TH ST. NORTH  
CLEARWATER, FL 33762 US

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:

01/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: GRAESE, JILL E  
Address: 8440 43RD ST. NORTH  
City-St-Zip: PINELLAS PARK, FL 34665

Title: DV ( ) Delete  
Name: ADAMS, ANDREW J SR.  
Address: 8440 43RD ST. NORTH  
City-St-Zip: PINELLAS PARK, FL 34665

Title: DST ( ) Delete  
Name: GRAESE, LARRY A  
Address: 8440 43RD ST. NORTH  
City-St-Zip: PINELLAS PARK, FL 34665

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: GRAESE, JILL E  
Address: 10755 49TH ST. NORTH  
City-St-Zip: CLEARWATER, FL 33762

Title: DV (X) Change ( ) Addition  
Name: ADAMS, ANDREW J SR.  
Address: 10755 49TH ST. NORTH  
City-St-Zip: CLEARWATER, FL 33762

Title: DST (X) Change ( ) Addition  
Name: GRAESE, LARRY A  
Address: 10755 49TH ST. NORTH  
City-St-Zip: CLEARWATER, FL 33762

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: JILL E. GRAESE

DP

01/28/2008

Electronic Signature of Signing Officer or Director

Date