

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 12, 2006 8:00 am**  
**Secretary of State**

04-12-2006 90097 012 \*\*\*150.00

**DOCUMENT # P97000105013**

1. Entity Name

SHREDDERMAN, INC.



Principal Place of Business

6312 VIA VENETIA N  
DELRAY BEACH FL 33484

Mailing Address

6312 VIA VENETIA N  
DELRAY BEACH FL 33484



2. Principal Place of Business

4882 N. CITATION DR.  
APT. # 101  
DELRAY BEACH, FL  
33445 U.S.A.

3. Mailing Address

4882 N. CITATION DR.  
APT. # 101  
DELRAY BEACH, FL  
33445 U.S.A.

1st MOORE

CR2E034 (10/05)

4. FEI Number

65-0804016

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

DIAMOND, JEFFREY  
6312 VIA VENTENTIA N  
DELRAY BEACH FL 33484

7. Name and Address of New Registered Agent

Name **DIAMOND, JEFFREY**  
Street Address (P.O. Box Number is Not Acceptable)  
**4882 N. CITATION DR.**  
**APT. # 101**  
City **DELRAY BEACH** FL Zip Code **33445**

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

*Jeff Diamond*, **JEFF DIAMOND, PRES.**

**4/5/06**

Signature type in printed name of registered agent and file it applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE .. **DPS** ☐ Delete  
NAME **DIAMOND, JEFFREY**  
STREET ADDRESS **6312 VIA VENTETIA N**  
CITY-ST-ZIP **DELRAY BEACH FL 33484**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPS** ☒ Change ☐ Addition  
NAME **DIAMOND, JEFFREY**  
STREET ADDRESS **4882 N. CITATION DR., APT. # 101**  
CITY-ST-ZIP **DELRAY BEACH, FL 33445**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/5/06 (954) 781-4219**

Date

Daytime Phone #