2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000105564

Entity Name: SHREDDERS INCORPORATED

FILED Oct 09, 2007 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|

218 MAIN STREET 218 MAIN STREET SUITE 506 SUITE 203

KIRKLAND, WA 98033 KIRKLAND, WA 98033

New Mailing Address: **Current Mailing Address:**

218 MAIN STREET 218 MAIN STREET

SUITE 203 SUITE 506 KIRKLAND, WA 98033 KIRKLAND, WA 98033

FEI Number: 65-0883361 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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: DE HOWARTH

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

JASON, PAUL JASON, PAUL Name: Name:

218 MAIN STREET #506 Address: 218 MAIN STREET #203 Address: City-St-Zip: KIRKLAND, WA 98033 City-St-Zip: KIRKLAND, WA 98033

() Delete Title: Title: (X) Change () Addition

Name: JASON, SUSAN Name: JASON, SUSAN 218 MAIN STREET #506 Address: 218 MAIN STREET #203 Address:

KIRKLAND, WA 98033 KIRKLAND, WA 98033 City-St-Zip: 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.

Ρ SIGNATURE: PAUL JASON 10/09/2007