

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000003239

**FILED  
Apr 19, 2016  
Secretary of State  
CC7922196398**

**Entity Name:** DELOITTE TOUCHE TOHMATSU SERVICES, INC.

**Current Principal Place of Business:**

30 ROCKEFELLER PLAZA  
42ND FLOOR  
NEW YORK, NY 10112

**Current Mailing Address:**

30 ROCKEFELLER PLAZA  
42ND FLOOR  
NEW YORK, NY 10112 US

**FEI Number: 13-3086681**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           DIRECTOR, TREASURER  
Name           BALI, ASHISH  
Address        30 ROCKEFELLER PLAZA  
                  42ND FLOOR  
City-State-Zip: NEW YORK NY 10112

Title           SECRETARY  
Name           HIRSHFIELD, MATTHEW  
Address        30 ROCKEFELLER PLAZA  
                  42ND FLOOR  
City-State-Zip: NEW YORK NY 10112

Title           DIRECTOR  
Name           YASHAR, SUSAN  
Address        30 ROCKEFELLER PLAZA  
                  42ND FLOOR  
City-State-Zip: NEW YORK NY 10112

Title           DIRECTOR, PRESIDENT  
Name           FRIEDMAN, FRANK  
Address        30 ROCKEFELLER PLAZA  
                  42ND FLOOR  
City-State-Zip: NEW YORK NY 10112

*I hereby 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 all other like empowered.*

**SIGNATURE: MATTHEW HIRSHFIELD**

**SECRETARY**

**04/19/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date