2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 17, 2006 8:00 am Secretary of State

								U = 7 U	
DOCUMENT # F0200000344 1. Entity Name M&T SERVICES COMPANY (DELAWARE)					03-17-2006 90133 045 ***150.00				
Principal Place of Business Mailing Address									
9550 REGENCY SQUARE BLVD., SUITE 400 1717 ARCH STREET 35TH FL PHILADELPHIA, PA 19103-27			3-2768						
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02072006	Chg-P	CR2E0	34 (11/05)	
City & State		City & State			4. FEI Number 26-0000387				olied For Applicable
Zip	Country	Zip	Country	_	5. Certificate	of Status Desired		\$8.75 Addi Fee Required	
	6. Name and Address of Current I			7. Name and	Address of New	Registered A	Agent	-	
C T CORPORATION SYSTEM				Name					
1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			Street Ac	Street Address (P.O. Box Number is Not Acceptable)					
1			1						
∜			City	FL Zip Code					
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									
the obligations of registered agent.									
SIGNATURE									
<u> </u>	Signature, typed or printed name or registered agent a	and the k approache. (**O.C.)	vegasored regard segratu						
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.					00 May Be d to Fees				
10	OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO C	FFICERS AND	DIRECTORS	SIN 11
TITLE 1	PTD 1	☐ Detete	TITLE	ρTD				Change	Addition
NAME	GOLDMAN, MARTIN A		NAME	Willia	am Kane	- 44-0			
STREET ADORESS	1717 ARCH STREET, 35TH FLO		STREET ADDRESS CITY-ST-ZIP	1111	ARCHSt	35+7 tic	00m		
CITY-ST-ZIP	PHILADELPHIA, PA 191032768		TITLE	T NIIQ	melphia	PA 19103	52160	Change	☐ Addition
TITLE NAME	VD GOLDMAN, GARY	☐ Delete	NAME					□ Ollantic	☐ Young
STREET ADDRESS	1717 ARCH STREET, 35TH FLC	OR	STREET ADDRESS						
CITY-ST-ZIP	PHILADELPHIA, PA 191032768		CITY-ST-ZIP						
TITLE	S	☐ Delete	TITLE					Change	☐ Addition
NAME ATTRET LOOPERS	SKLAR, STUART M	NOR.	NAME Street address						
STREET ADDRESS CITY-ST-ZIP	1717 ARCH STREET, 35TH FLC PHILADELPHIA, PA 191032768		CITY-ST-ZIP						
TITLE	,	☐ Delete	TITLE					Change	Addition
NAME			NAME CTREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
TITLE		☐ Delete	TITLE					Change	Addition
NAME			NAME CYDEET ADDOCCC						
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP						
TITLE		☐ Delete	TITLE	 				☐ Change	☐ Addition
NAME		L Deteto	NAME						_
STREET ADDRESS	1		STREET ADDRESS	1					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 otten like empowered.

SIGNATURE:

SIGNATUREAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/06 904-805-070