

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004130

FILED  
Jun 13, 2011  
Secretary of State

Entity Name: AMBASSADOR LEGAL SERVICES INC.

**Current Principal Place of Business:**

25-B VREELAND ROAD, SUITE 301  
FLORHAM PARK, NJ 07932

**New Principal Place of Business:**

**Current Mailing Address:**

25-B VREELAND ROAD, SUITE 301  
FLORHAM PARK, NJ 07932

**New Mailing Address:**

FEI Number: 20-3134905

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
C/O C T CORPORATION SYSTEM  
1200 SOUTH ISLAND ROAD  
PLANTATION, FL 33324 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: STAUSS, ANDREW W  
Address: 650 FIFTH AVE., SUITE 2400  
City-St-Zip: NEW YORK, NY 10111

Title: VT  
Name: SCHWARTZ, BELA R  
Address: 650 FIFTH AVE., SUITE 2400  
City-St-Zip: NEW YORK, NY 10111

Title: VSD  
Name: WALKER, HAROLD C  
Address: 650 FIFTH AVE., SUITE 2400  
City-St-Zip: NEW YORK, NY 10111

Title: CEO  
Name: SANDLER, MICHAEL  
Address: 25 B VREELAND RD - SUITE 301  
City-St-Zip: FLORHAM PARK, NJ 07932

Title: CFO  
Name: COLETTI, PETER  
Address: 25 B VREELAND RD - SUITE 301  
City-St-Zip: FLORHAM PARK, NJ 07932

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: PETER COLETTI

CFO

06/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date