2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004694

Entity Name: INFOCROSSING SERVICES WEST, INC.

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business: 3300 EAST BIRCH STREET			New Principal Place of Business:		
BREA, CA		L I			
Current Mailing Address:			New Mailing Address:		
3300 EAS ⁻ BREA, CA	T BIRCH STRE 92821	ET			
FEI Number:	74-3063869	FEI Number Applied For ()	FEI Number Not Appli	licable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
1201 HAYS TALLAHAS	SSEE, FL 3230	012525 US			
	named entity s e of Florida.	submits this statement for the	purpose of changing it	its registered office or registered agent, or both	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ac	gent	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	C () LONSTEIN, ZAC 2 CHRISTIE HE LEONIA, NJ 07	IGHTS STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () WALLACH, ROE 2 CHRISTIE HE LEONIA, NJ 07	IGHTS STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () LETIZIA, NICK 2 CHRISTIE HE LEONIA, NJ 07		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () MCHALEA, WIL 2 CHRISTIE HE LEONIA, NJ 07	IGHTS STREET	Title: Name: Address: City-St-Zip:	T (X) Change () Addition MCHALE, WILLIAM J 2 CHRISTIE HEIGHTS STREET LEONIA, NJ 07605	

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.

SIGNATURE: WILLIAM J. MCHALE T 04/25/2008