

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003156

FILED
Apr 04, 2007
Secretary of State

Entity Name: SIEMENS BUSINESS SERVICES, INC.

Current Principal Place of Business:

1209 ORANGE ST.
WILMINGTON, DE 19801

New Principal Place of Business:

Current Mailing Address:

C/O SIEMENS CORPORATION
170 WOOD AVENUE SOUTH
ISELIN, NJ 08830

New Mailing Address:

FEI Number: 13-3715291 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MEHTA, SHIRLEY
Address: 101 MERRITT
City-St-Zip: NORWALK, CT 06851

Title: AS () Delete
Name: GOTLIFFE, ALAN
Address: 170 WOOD AVE. SOUTH
City-St-Zip: ISELIN, NJ 08830

Title: D () Delete
Name: MCKENNA, JOHN A
Address: 101 MERRITT 7
City-St-Zip: NORWALK, CT 06851

Title: D () Delete
Name: NOLEN, GEORGE
Address: 153 EAST 53RD STREET
City-St-Zip: NEW YORK, NY 10022

Title: D (X) Delete
Name: MAYER, JOERG
Address: 153 EAST 53RD STREET
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: BURCK, GEORGE T JR.
Address: 1000 DEERFIELD PARKWAY
City-St-Zip: BUFFALO GROVE, IL 60089

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: STUMPF, HERIBERT
Address: 153 EAST 53RD STREET
City-St-Zip: NEW YORK, NY 10022

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ALAN GOTLIFFE

AS

04/04/2007

Electronic Signature of Signing Officer or Director

_____ Date