2006 FOR PROFIT CORPORATION

Apr 10, 2006 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # F96000002638 04-10-2006 90285 009 ***150.00 1. Entity Name INSERVE SUPPORT SOLUTIONS, INC. Principal Place of Business Mailing Address OUDPACE SADDLE RIVER EXECUTIVE CENTRE SADDLE RIVER EXECUTIVE CENTRE 1 ROUTE 17 SOUTH 1 ROUTE 17 SOUTH SADDLE RIVER, NJ 07458 SADDLE RIVER, NJ 07458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03152006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For 68-0289289 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FI 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. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. CEOD CEO TITLE Delete TITLE Change ☐ Addition SALDARNI, CHARLES T LARRY ELLBERGER NAME NAME SADDLERIVER EXECUTIVE CENTRE SADDLE RIVER EXECUTIVE CENTRE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SADDLE RIVER, NJ 07458 CITY-ST-ZIP SADDLE RIVER, NJ 07458 TITLE Delete TITLE Change ☐ Addition BOYLE, BERNARD C NAME NAME SADDLE RIVER EXECUTIVE CENTRE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SADDLE RIVER, NJ 07458 CITY-ST-ZIP TITLE Dolete TITLE ☐ Change Addition JACOBSON, BETH NAME NAME STREET ADDRESS SADDLE RIVER EXECUTIVE CENTRE STREET ADDRESS SADDLE RIVER, NJ 07458 CITY-ST-70 CITY-ST-ZIP TITLE Dolete. TITLE ☐ Change ☐ Addition ROSE, KENNETH NAME NAME STREET ADDRESS SADDLE RIVER EXECUTIVE CENTRE STREET ADDRESS CITY-ST-ZIP SADDLE RIVER, NJ 07458 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME

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 other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: BERNARD C. ERNARD C. BOYLE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

STREET ADDRESS

CITY+ST-7IP

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