


2006 FOR PROFIT CORPORATION ANNUAL REPORT

150

DOCUMENT # F96000006712 1. Entity Name AT&T SOLUTIONS INC.	
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Principal Place of Business ONE AT&T WAY ROOM 4A235 BEDMINSTER, NJ 07921 US	Mailing Address ONE AT&T WAY ROOM 4A235 BEDMINSTER, NJ 07921 US
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DO NOT WRITE IN THIS SPACE

FILED
06 MAY -3 PM 4: 17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04262006 No Chg-P CR2E034 (11/05)

4. FEI Number 22-3434843	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS METZGER, KATHLEEN S ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS TUTNAUER, JEFF ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS BROWN, THOMAS ONE AT&T WAY BEDMINSTER, NJ 07921
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ZIMMERMAN, ROBERT 55 CORPORATE DR BRIDGEWATER, NJ 08807
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D EICHMAN, KAREN 55 CORPORATE DR BRIDGEWATER, NJ 08807
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FECHHELM, PAUL 55 CORPORATE DR BRIDGEWATER, NJ 08807

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05/12/06--01015--023 **3450.00

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 other like empowered.

SIGNATURE: _____ (Signature) _____ (Typed Name)
Date: 4/27/06 Daytime Phone #: (908) 234-8955