

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005381

FILED  
Feb 25, 2008  
Secretary of State

Entity Name: MULTIPLAN SERVICES CORPORATION

## Current Principal Place of Business:

115 FIFTH AVE., 7TH FL  
NEW YORK, NY 100031004

## New Principal Place of Business:

## Current Mailing Address:

115 FIFTH AVE., 7TH FL  
NEW YORK, NY 100031004

## New Mailing Address:

FEI Number: 06-1533300

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLUMBERGEXCELSIOR CORPORATE SERVICES INC  
4435 OLD WINTER GARDEN ROAD  
ORLANDO, FL 32802 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: PCEO ( ) Delete  
Name: TUBAK, MARK  
Address: 115 5TH AVE.  
City-St-Zip: NEW YORK, NY 10003

Title: VT ( ) Delete  
Name: GERSTEIN, RICHARD  
Address: 115 5TH AV., 7TH FL  
City-St-Zip: NEW YORK, NY

Title: VS ( ) Delete  
Name: FELLER, MARCY E  
Address: 115 5TH AV., 7TH FL  
City-St-Zip: NEW YORK, NY

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change ( ) Addition  
Name: TABAK, MARK  
Address: 115 5TH AVE.  
City-St-Zip: NEW YORK, NY 10003

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 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: SUZANNE BLACK-KELLER

AGC

02/25/2008

Electronic Signature of Signing Officer or Director

Date