2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P31941

C SERVICE COMPANY \DELAWARE\ INC

FILED Apr 29, 2009 Secretary of State

Entity Nar	ne: L.C. SER	VICE COMPANY (DELAWAR	E INC.				
Current P	rincipal Place	e of Business:	New Prince	New Principal Place of Business:			
8TH FLOO	RNE AVENUE PR TAX DEPT ERGEN, NJ (
Current M	ailing Addre	ss:	New Maili	New Mailing Address:			
8TH FLOO	RNE AVENUE PR TAX DEPT ERGEN, NJ (
FEI Number:	22-3039893	FEI Number Applied For ()	FEI Number Not Appl	icable()	Certificate of Status Desi	ired()	
Name and	Address of (Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
1201 HAYS	E HALL CORF S STREET SSEE, FL 323		1200 SOU ⁻	CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US			
in the State	named entity e of Florida. RE: MARK W	submits this statement for the	purpose of changing i	ts registered o	ffice or registered agen 04/29/2009	it, or both,	
SIGNATUR		nic Signature of Registered Ag	ont		Date		
Election Can		g Trust Fund Contribution ().	GIIL		Date		
OFFICERS	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CEO (MCCOMB, WII 1441 BROADV NEW YORK, N	VAY	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	D (SCARPA, MICH ONE CLAIBOR NORTH BERG	NE AVE	Title: Name: Address: City-St-Zip:	VP (X) WEISZ, MARK ONE CLAIBORN NORTH BERGE	NE AVE		
Title: Name: Address: City-St-Zip:	VP (GOODELL, EL ONE CLAIBOR NORTH BERG	NE AVE	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title:	S () Delete	Title:	()	Change () Addition		

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARK D. WEISZ VP 04/29/2009

RUBINO, NICHOLAS

ONE CLAIBORNE AVE

NORTH BERGEN, NJ 07047

Name:

Address:

City-St-Zip: