2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 844475

Entity Name: AIG TRAVEL ASSIST, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
6464 SAVO SUITE 200 HOUSTON		us					
				New Mailing Address:			
-					-		
70 PINE ST ATTM E M NEW YORK		US		70 PINE ST. ATTM PATRICK BURKE NEW YORK, NY 10270 US			
FEI Number:	13-2978927	FEI Number Applied For ()	FEI Num	ber Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name					Address of N	ew Registered Agent:	
PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST. SUITE 105 TALLAHASSEE, FL 32301 US							
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:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CBD () E HERNANDEZ, JO 175 WATER STR NEW YORK, NY	EET		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	PD () D PAGE, JAMES D 6464 SAVOY DRI HOUSTON, TX 7			Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	CEOD () DRUTLEDGE, JEF 6464 SAVOY DRI HOUSTON, TX 7	VE, STE. 200		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	TCD () C TYLER, NICHOLA 70 PINE STREET NEW YORK, NY	AS .		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	S () E TUCK, ELIZABET 6464 SAVOY DRI HOUSTON, TX 7	VE, STE. 200		Title: Name: Address: City-St-Zip:	S (X) BOZOVIC, VICTO 6464 SAVOY DE HOUSTON, TX	RIVE, STE. 200	
Title: Name: Address: City-St-Zip:	AS () C CINQUEGRANA, 70 PINE STRET NEW YORK, NY			Title: Name: Address: City-St-Zip:	AS (X) ROEHRS, CHRIS 70 PINE STRET NEW YORK, NY		

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: VICTORIA BOZOVIC S 04/29/2009