

2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 29, 2005
Secretary of State**

DOCUMENT# F00000005394

Entity Name: DIL/SAHP CORP.

Current Principal Place of Business:

C/O AIG SUN AMERICA
1 SUN AMERICA CENTER 37TH FL
LOS ANGELES, CA 90067

New Principal Place of Business:

Current Mailing Address:

C/O AIG SUN AMERICA
1 SUN AMERICA CENTER 37TH FL
LOS ANGELES, CA 90067

New Mailing Address:

FEI Number: 91-1913392 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: P () Delete
Name: FOWLER, MICHAEL L
Address: 1 SUN AMERICA CENTER
City-St-Zip: LOS ANGELES, CA 90067

Title: VPAS () Delete
Name: FAIR, ALAN T
Address: 1 SUN AMERICA CENTER
City-St-Zip: LOS ANGELES, CA 900676022

Title: S () Delete
Name: NIXON, CHRISTINE
Address: 1 SUN AMERICA CENTER
City-St-Zip: LOS ANGELES, CA 90067

Title: T () Delete
Name: GILLIS, N. SCOTT
Address: 1 SUN AMERICA CENTER
City-St-Zip: LOS ANGELES, CA 90067

Title: AS () Delete
Name: PUZON, VIRGINIA
Address: 1 SUN AMERICA CENTER
City-St-Zip: LOS ANGELES, CA 90067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 for the exemption stated in Section 119.07(3)(i), 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: VIRGINIA PUZON

AS

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date