


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F96000004884 1. Entity Name AIG WARRANTY SERVICES AND INSURANCE AGENCY, INC.	
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FILED
 04 APR 29 AM 9:10
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business 500 N. MADISON STREET CHICAGO, IL 60661	Mailing Address 500 N. MADISON STREET CHICAGO, IL 60661
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DO NOT WRITE IN THIS SPACE

04262004	No Chg-P	CR2E034 (10/03)
4. FEI Number 38-3301989	Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	<p style="font-size: 24px; font-weight: bold;">DO NOT WRITE IN THIS SPACE</p>
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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.

900034719289

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 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	PDCO FRANKEL, MATTHEW W 175 WATER STREET NEW YORK, NY 10038
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TUCK, ELIZABETH M 70 PINE STREET NEW YORK, NY 10270
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FABEL, MERRITT W 70 PINE STREET NEW YORK, NY 10270
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVP DESANTIS, ANTHONY 3 BEAVER VALLEY ROAD WILMINGTON, DE 19803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JACOBSON, ROBERT P 175 WATER STREET NEW YORK, NY 10038
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Elizabeth M. Tuck* 4-26-04 (212) 770-7000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 598287 4320171

AUTHORIZATION : *Patricia Pigato*

COST LIMIT : \$ 150.00

ORDER DATE : April 28, 2004

ORDER TIME : 5:28 PM

ORDER NO. : 598287-065

CUSTOMER NO: 4320171

CUSTOMER: Bernadette Colon
American International Group,
30th Floor, 70 Pine Street
- Corporate
New York, NY 10270

ANNUAL REPORT FILING

NAME: AIG WARRANTY SERVICES AND
INSURANCE AGENCY, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- _____ CERTIFIED COPY
- XX _____ PLAIN STAMPED COPY
- _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea - Ext. 2914

EXAMINER'S INITIALS: _____

RECEIVED
04 APR 29 PM 1:11
DIVISION OF CORPORATION