

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 840839

Entity Name: AIG CLAIMS, INC.**Current Principal Place of Business:**175 WATER STREET
18TH FLOOR
NEW YORK, NY 10038**Current Mailing Address:**175 WATER STREET
18TH FLOOR
NEW YORK, NY 10038 US**FEI Number:** 13-2925174**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS ST
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

Officer/Director Detail :

Title ASSISTANT SECRETARY
Name STEINBOK, VIKTORIYA
Address 180 MAIDEN LANE
37TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR
Name LAUNER, CINDY
Address 175 WATER STREET
18TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title SECRETARY
Name KENT, TANYA
Address 175 WATER STREET
15TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR
Name BAUGH, ALEXANDER
Address 175 WATER STREET
26TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title GENERAL COUNSEL, EXECUTIVE
VICE PRESIDENT
Name KOBRICK, ERIC
Address 80 PINE STREET
City-State-Zip: NEW YORK NY 10005

Title PRESIDENT
Name BERG, NICHOLAS
Address 175 WATER STREET
18TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title TREASURER
Name CAULFIELD, JUSTIN
Address 175 WATER STREET
29TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR
Name DOYLE, LAWRENCE
Address 175 WATER STREET
18TH FLOOR
City-State-Zip: NEW YORK NY 10038

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I hereby 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 all other like empowered.

SIGNATURE: TANYA KENT**SECRETARY****04/27/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

| | |
|-----------------|-------------------|
| Title | DIRECTOR |
| Name | STRATTS, GEORGE |
| Address | 175 WATER STREET |
| City-State-Zip: | NEW YORK NY 10038 |