

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 844935

**Entity Name:** AIG AEROSPACE INSURANCE SERVICES, INC.**Current Principal Place of Business:**3500 LENOX ROAD  
SUITE 1100  
ATLANTA, GA 30326**Current Mailing Address:**3500 LENOX ROAD  
SUITE 1100  
ATLANTA, GA 30326 US**FEI Number:** 58-1354492**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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**Officer/Director Detail :**

Title	SECRETARY
Name	SANGUINETTI, JUAN
Address	175 WATER STREET 15TH 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	PRESIDENT
Name	LANFORD, LEE
Address	3500 LENOX ROAD SUITE 1100
City-State-Zip:	ATLANTA GA 30326

Title	DIRECTOR
Name	GREEN, EDWARD
Address	3500 LENOX ROAD SUITE 1100
City-State-Zip:	ATLANTA GA 30326

Title	DIRECTOR
Name	LI, GUOQIANG
Address	3500 LENOX ROAD SUITE 1100
City-State-Zip:	ATLANTA GA 30326

Title	DIRECTOR
Name	BILSBY, PETER
Address	3500 LENOX ROAD SUITE 1100
City-State-Zip:	ATLANTA GA 30326

*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:** JUAN SANGUINETTI**SECRETARY****06/04/2020**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date