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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 819738

AMERICAN INTERNATIONAL UNDERWRITERS CORPORATION

Principal Place	of Business	Mailing Address	Mailing Address			i ingini tamin sinin mits inggan ilin	/I 1214 BIBN 978	1) bidie diasi di	#II: #1811 IMP1
70 PINE STREE	т	70 PINE STREET			Ì	•			
16TH FLOOR	ATTN E M TUCK				DO NOT WRIT	E IN THIS S	SPACE		
NEW YORK NY 10270 NEW YORK NY 10270 US US						3. Date Incorporated or Qualifed			
03		00				07/22/1966			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Apr	olied For
21	ace of Bushioso	26				13-4923030		Not	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			$\neg \neg$			\$8.75 A	dditional
22		27	27			5. Certifcate of Status Desired		Fee Rec	quired
City & State	8	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution	<u> </u>	Added to	Fees
Zip	Country	Zip				8. This corporation owes the current year Intangible			
24	25	29 3	<u>o </u>			Personal Property Tax.			□No
	9. Name and Address of Curre	nt Registered Agent	81	Nama		10. Name and Address of New R	agistered A	gent	
TUE	DESITION HALL CORPORATION	I SYSTEM INC	[81	Name					
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS ST.			82	Street	Addres	ss (P.O. Box Number is Not Acceptal	ble)		
	E 105		83						
•	AHASSEE FL 32301		103						
\ \	AIAGGEL I E GEGOT		84	City			FL	85 Zip C	ode
. 44	to the provisions of Sections 607.050	00 COZ 1500 Flands Chabatan	the show	namad		ation submits this statement for the		hanging its	registered
' office or n	egistered agent, or both, in the State	of Florida. Such change was auti	honzed by	the corpo	oration	's board of directors. I hereby accept	the appoin	tment as rec	istered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Florid	la Statutes						
SIGNATURE	Signature, typed or printed name of registered age	at and title if applicable (NOTC 9	legistered Arrel	nt signature i	required v	when reinstating)	DATE		ì
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12
TITLE	PD	☐ DELETE		1.1 TITLE				Change	☐ Addition
NAME	GREENBERG, EVAN		1.2 NAME						
STREET ADDRESS	70 PINE ST.		1.3 STREE	FADDRESS					
CITY-ST-ZIP	NEW YORK NY		1.4 CITY-ST-ZIP						
TITLE	CD	☐ DELETE	2.1 TITLE					Change	☐ Addition
NAME	GREENBERG, M.R.	1	2.2 NAME						ļ
STREET ADDRESS	70 PINE ST.		2.3 STREE	TADDRESS	Į				- 1
CITY-ST-ZIP	NEW YORK NY 10270		2, 4 CITY-ST-ZIP		L				
TITLE	AVP			3.1 TITLE				Change	☐ Addition
NAME	FABEL, MERRITT		3.2 NAME						
STREET ADDRESS	70 PINE STREET		3.3 STREE	TADDRESS					
CITY-ST-ZIP	NEW YORK NY			3.4. CITY-ST-ZIP		<u> </u>			
TITLE	VP	X DELETE	4.1 TITLE					Change	Addition (
NAME	WALSH, DAVID J		4. 2 NAME						
STREET ADDRESS	160 WATER ST		4.3 STREET ADDRESS						
CITY-ST-ZIP	NEW YORK NY 10038		4.4 CITY-5	T-ZIP	<u> </u>				- A
TITLE	\$	☐ DELETE	5.1 TTLE					Change	☐ Addition
NAME	TUCK, ELIZABETH M.		5.2 NAME		-				İ
STREET ADDRESS				TADDRESS	1				
CITY-ST-ZIP	NEW YORK NY		5.4 CITY-5 6.1 TITLE	T-ZIP	₩			Change	☐ Addition
TITLE	C	☐ DELETE]			change	
NAME	WETTERHAHN, DAWN	_	6.2 NAME	T 400000					
L STREET ADORESS	107 CHARLES A. LINDBERG D)R	6.3 STREE	T ADDRESS	1				

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: