2005 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT						EIL-EU				
1. Entity Name						FILED 05 APR 29 AN 10: 13 SECTION AND A TALLANDASSEE, FLORIDA				
A.I. CREDI	IT CORP.	•				05 Ar"	المريران ا	FI_ORI	ΑČ	
Principal Place of Business Mailing Address					†	SECTIAL	IVZZER	• • •		
160 WATER ST. 160 WATER ST.						HELL				
19TH FLOOR 19TH FLR.										
NEW YORK, NY 10038 NEW YORK, NY 10038					1 (48) (5) (5) (6)	W. 53181 SWS NAM 5611			IPE: 11 (EG)	
2 Principal Pla	as of Business									
2. Principal Place of Business Street 3. Mailing Address Street Suite, Apt. #, etc.			rec	<u>f</u>	-	10:0: 1 1			110 1X	
Attn: Bernadette			He 1	Colon	04252005	Chg-P	CR2E03	4 (10/03)		
JOYSEY	City, NJ	City & State New Yor K,	NY		4. FEI Number 13-27369	972		 	plied For t Applicable	
07/302 4 COUNTRY ZIP 10270			Country	ŚΑ	5. Certificate of Status Desired			\$8.75 Additional Fee Required		
	6. Name and Address of Current F	7. Name and Address of New Registered Agent Name								
UNITED ST	ATES CORPORATION COMP									
1201 HAYES ST.				Street Address (P.O. Box Number is Not Acceptable)						
SUITE 105 TALLAHASSEE, FL 32301										
				City Zip Code						
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.									and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alignature required when reinstating) DATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees										
10.	OFFICERS AND I	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFFI	CERS AND	DIRECTORS	SIN 11	
	PD	☐ Delete	TITLE	PD				Change Change	Addition	
1 1	VITKAUSKAS, GERALD V		NAME	Vit!	Kauskas	s, Geral	av		1	
1 1	160 WATER STREET NEW YORK, NY		CITY-SI	ADDRESS 101	Hudson	street,	~~~			
	VG		TITLE	VG	SEY CHI	1, NO C	27302	<u>F</u> 1 character		
	CANO, ALEXANDER	☐ Delete	NAME		no, Alexa	more		K Change	Addition	
l i	70 PINE ST.			ADDRESS LO	HUISON	Strea				
CITY-ST-ZIP i	NEW YORK, NY 10270		CITY-ST	T-ZIP Jer	Bu Citu		7302		ì	
TITLE '	т	☐ Delete	TITLE		- 1 - 1			Change	Addition	
	BENSINGER, STEVEN J		NAME	1						
1 :	70 PINE STREET NEW YORK, NY 10270		STREET CITY-ST	ADORESS					!	
	S	Delete	TITLE					Channe		
I I	TUCK, ELIZABETH M	□ Detete	NAME					☐ Change	☐ Addition	
I I	70 PINE STREET		STREET	ADDRESS						
CITY-ST-ZIP	NEW YORK, NY 10270		CITY-S	T-ZIP						
!	D	🔀 Delete	TITLE			20005		Change	☐ Addition	
ł I	SMITH, HOWARD I		NAME			ഭഗവവദ	5U5	5154	12	
: 1	70 PINE STREET NEW YORK, NY 10270		CITY-S	T-ZIP					l	
-	V	☐ Delete	TITLE	VD		***		⊠ Change	Addition	
	VOGEN, MICHAEL D	E BOIM	NAME	Vice	en. Micha	nel		(22) Orienge	A	
STREET ADDRESS	160 WATER STREET		STREET	ADDRESS ()	HUASON	street				
	NEW YORK, NY 10038		CITY-S		SCY CHY,	NUUIO	<u>0'2</u>			
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 eath; 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 manch H-26-05 (212) 770-7008										
3.3.37.1	SIGNATURE AND TYPED OR P	RINTED NAME OF SIGNING OFFICER O	R DIRECTO	A		Date	De De	ytime Phone #		



ACCOUNT NO. : 072100000032

REFERENCE : 3<u>4</u>3551

4320171

AUTHORIZATION

COST LIMIT : \$ 150.00

ORDER DATE: April 28, 2005

ORDER TIME : 10:06 AM

ORDER NO. : 343551-005

CUSTOMER NO: 4320171

CUSTOMER: Bernadette Colon

American International Group, 30th Floor, 70 Pine Street

- Corporate

New York, NY 10270

ANNUAL REPORT FILING

NAME: A.I. CREDIT CORP.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext. 2956

EXAMINER'S INITIALS: