2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED **DOCUMENT #857724** 2008 APR 22 PM 4: 19 AMERICAN INTERNATIONAL SOUTH INSURANCE COMPANY SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address **70 PINE STREET** 70 PINE ST. ATTN: E.M. TUCK NEW YORK, NY 10270 NEW YORK, NY 10270 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04092008 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 02-6008643 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name INSURANCE COMMISSIONER Street Address (P.O. Box Number is Not Acceptable) CAPITOL BLDG 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 \$5.00 May Be 1/ Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CPD TITLE ☐ Delete TITLE Chairman President D Change MOOR, KRISTIAN P NAME STREET ADDRESS **70 PINE STREET** STREET ADDRESS CITY - ST-ZIP NEW YORK, NY 10270 CITY - ST - ZIP SVPD TITLE ☐ Delete TITLE ☐ Change ☐ Addjaf DANGELO, CHARLES H NAME NAME 200125129252 STREET ADDRESS 70 PINE STREET STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10270 CHY-SI-ZIP TITLE Delete TITLE ☐ Change ☐ Addition DOUGLAS, FRANK H JR. NAME NAME STREET ADDRESS 70 PINE STREET STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10270 CITY-ST-ZIP SVPIGO K Change TITLE ☐ Delete TITLE ☐ Addition HARKINS, KENNETH V NAME NAME STREET ADDRESS 70 PINE STREET STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10270 City-St-ZiP TITLE Delete TITLE ☐ Change Addition NAME SCHADER, CHARLES R NAME STREET ADDRESS 70 PINE STREET STREET ADDRESS NEW YORK, NY 10270 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete THLE ☐ Change ☐ Addition TUCK, ELIZABETH M NAME NAME STREET ADDRESS 70 PINE STREET STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10270 City-St-ZiP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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

212-770-700

As of April 09, 2008

American International South Insurance Company

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As of April 09, 2008

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	ACCOUNT NO. : 07210000032	
	REFERENCE : 536263 432017	
	AUTHORIZATION: Spellelle man.	m ^a .
	COST LIMIT : \$ 150.00	
ORDER DATE :	April 20, 2008	
ORDER TIME :	10:08 AM	
ORDER NO. :	536263-090	
CUSTOMER NO:	4320171	
	ANNUAL REPORT FILING	OB APR
NAME:	AMERICAN INTERNATIONAL SOUTH INSURANCE COMPANY FL 2008 AR	OB NPR 22 PH 3: 00
XX ANNUAL	REPORT	
PLEASE RETURN	THE FOLLOWING AS PROOF OF FILING:	
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CONTACT DEDGO	N. Matthew Young - Ext 2962	

EXAMINER'S INITIALS: