



# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

<b>DOCUMENT # F03000004605</b> 1. Entity Name <b>AIG WORLD INVESTIGATIVE RESOURCES, INC.</b>						06 MAR -6 AM 11:32 100067146451 STATE OF FLORIDA	
Principal Place of Business <b>C/O COMPANY 70 PINE STREET NEW YORK, NY 10270</b>				Mailing Address <b>ATTN: BERNADETTE COLON 70 PINE STREET NEW YORK, NY 10270</b>			
2. Principal Place of Business <b>Same</b>		3. Mailing Address <b>Same</b>					
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 		03022006 Chg-P CR2E034 (11/05)		4. FEI Number <b>20-0242412</b>	
City & State 		City & State 		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		Applied For Not Applicable	
Zip 		Country 		Zip 		Country 	
<b>6. Name and Address of Current Registered Agent</b> <b>CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525</b>				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>			
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>							
<b>Amended AR is \$61.25</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>COB</b> <b>PATRIKIS, ERNEST T</b> <b>70 PINE STREET</b> <b>NEW YORK, NY 10270</b> <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>NP</b> <b>Glennwood B. Phillips</b> <b>3144 Walnut Hill Lane</b> <b>Dallas, TX 75231</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CMO</b> <b>PARISI, LOUIS</b> <b>70 PINE STREET</b> <b>NEW YORK, NY 10270</b> <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VT</b> <b>GENDER, ROBERT A</b> <b>70 PINE STREET</b> <b>NEW YORK, NY 10270</b> <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>KOBRICK, ERIC S</b> <b>70 PINE STREET</b> <b>NEW YORK, NY 10270</b> <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>MONAHAN, JOHN</b> <b>70 PINE STREET</b> <b>NEW YORK, NY 10270</b> <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>TUCK, ELIZABETH M</b> <b>70 PINE STREET</b> <b>NEW YORK, NY 10270</b> <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other like empowered.							
<b>SIGNATURE:</b> <u>Elizabeth M Tuck</u> <b>Elizabeth M Tuck</b> <u>3/2/06 (212) 770-7000</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>							



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 900689 4320171

AUTHORIZATION

COST LIMIT : \$ 61.25

ORDER DATE : March 3, 2006

ORDER TIME : 9:41 AM

ORDER NO. : 900689-005

CUSTOMER NO: 4320171

ANNUAL REPORT FILING

NAME: AIG WORLD INVESTIGATIVE  
RESOURCES, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - Ext. 2908

EXAMINER'S INITIALS:

RECEIVED  
06 MAR -6 AM 10:47  
STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32304