FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **F9400006505**1. Corporation Name

AIG EQUITY SALES CORP.

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90076 041 ***150.00



Principal Place	of Business	Mailing Address							
O PINE ST.		70 PINE ST.	70 PINE ST.						
EW YORK NY	10270	30TH FLOOR				000	OT WRITE IN THE	SSPACE	
		NEW YORK NY 10270			DO NOT WRITE IN THIS SPACE				
		US				3. Date Incorporated or	Manted		Ļ
						12/20/1994			
Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		<u> </u>	pplied For
il		26			13-2701087			lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status D	esired 🗀	•	Additional	
i		27						tequired	
City & State	3	City & State			6. Election Campaign Fi	~ 11	•	May Be	
a		28			Trust Fund Contributi	<u>on</u>	Added	to Fees	
Z íp	Country	Zip				8. This corporation owes	•		~ \
4	25	29	30			Personal Property Ta		Yes	□No
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address	of New Registered	Agent	
									ł
THE PRENTICE-HALL CORPORATION SYSTEM, INC.				82	Street	Address (P.O. Box Number is No	t Acceptable)		
•	HAYS ST., #105								
TALL	AHASSEE FL 32301			83					J
· o								ne Zin	Code
ry				84	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	es, the a	above	-named	corporation submits this stateme	nt for the purpose of	f changing it	s registered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	or Florida. Such change was a	umonze	a by	me corpo	oration's board of directors. I here	by accept the appo	intment as re	egistered
SIGNATURE							DATE		
					t signature r	equired when reinstating) ADDITIONS/CHANGE		ND DIRECT	ORS IN 12
12.		AD DIRECTORS	_	TILE		7	3 10 011 0210 7	Change	
TITLE	PD	An Dece ic				Flataria Hal	00	, _ 0	
NAME	BALDWIN, C			IAME		Stefanis, Hei	<i>U</i> 1		
STREET ADDRESS	175 WATER ST		- 1		ADDRESS	Stefanis, Hel 70 Pine Stree New York, NY	-/ -/		§.
CITY-ST-ZIP	NEW YORK NY 10038	□ per car		CITY-S1	r-ZIP	NEW YORK, NY	10210	Change	Addition
TITLE !	VD	☐ DÉLETE	2.1 7					Clouman	
NAME :	CLOWE, KEVIN		2.2 N	AME					1
STREET ADDRESS	70 PINE ST.		2.3 9	TREET	ADDRESS				
CITY-ST-ZIP	NEW YORK NY 10005		2.44	CITY-S	T-ZIP				
TITLE	D	☐ DELETE	3.1 T	TTLE				Change	Addition
NAME	MATTHEWS, EDWARD E		3.2 N	MAME		•			
STREET ADDRESS	70 PINE ST.		3.3 5	STREET	ADDRESS	II.			
CITY-ST-ZIP	NEW YORK NY 10005		3.4.	CITY-S	T-ZIP				
TITLE	D	DELETE	4.1 T	MILE	_	\mathcal{D}		Change	Addition
NAME	DAVIS, FLORENCE	·	4.2	NAME		Patrikis, Erne 70 Pine Stree New York, no	st \mathcal{T}_{i}		1
STREET ADDRESS	70 PINE ST.		4.3 9	STREET	ADDRESS	TO PINE STree	2 f-		
CITY-ST-ZIP	NEW YORK NY		4.4 0	CITY-S	r-ZiP	DEW YORK, DU	1 10270		_ }
TITLE	D	☐ DELETE	_	TTLE				Change	Addition
NAME	MULDOWNEY, JEROME T		5.21	NAME.					
STREET ADDRESS	175 WATER ST		5.3 5	STREE?	ADDRESS				ļ
				CITY-S					
CITY-ST-ZIP TITLE	NEW YORK NY 10038	☐ DELETE		TILE					Addition
	COAMADDELLA DULLOMENA	5		NAME				_ ,	_
NAME	SCAMARDELLA, PHILOMENA				ANNPERS	no Pine Stre	et		ļ
STREET ADDRESS	80 PINE ST.		0.3 3	اعتادر	LPDINE 33				

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: