FILED

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 01, 1999 8:00 am Secretary of State 1999 05-01-1999 90076 036 ***150.00 DOCUMENT # F9500000844 1. Cornoration Name AIG TECHNICAL SERVICES, INC. Principal Place of Business Mailing Address 70 PINE STREET 70 PINE STREET ATTN E M TUCK NEW YORK NY 10270 DO NOT WRITE IN THIS SPACE NEW YORK NY 10270 3. Date incorporated or Qualifed 02/21/1995 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For Not Applicable 13-3772426 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Country Zip Country Zip This corporation owes the current year Intangible □No 30 ☐ Yes 25 29 Personal Property Tax. 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET, STE 105 TALLAHASSEE FL 32301 83 Zip Code R4 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.1 TITLE TITLE CD SANDLER, ROBERT M 1.2 NAME NAME **70 PINE STREET** 1.3 STREET ADDRESS STREET ADDRESS NEW YORK NY 1.4 CITY-ST-ZIP CITY-ST-ZIP X DELETE ☐ Change Addition 2.1 TITLE TITLE PD Sweeney, James M. 70 Pine Street 22 NAME HUGHES, JOHN G NAME 70 PINE STREET 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP NEW YORK NY CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change (X Addition TITLE mª Fate, Carol A. Dooley, William N 3.2 NAME NAME 70 Pine Street 70 PINE STREET 3.3 STREET ADDRESS STREET ADDRES NEW YORK NY 3.4. CITY-ST-ZIP New YORK, NY CITY-ST-ZIP ☐ Change Addition DELETE TITLE 4.1 TITLE TUCK, ELIZABETH M 4.2 NAME NAME 70 PINE STREET 4.3 STREET ADDRESS STREET ADDRES **NEW YORK NY** 4.4 City-ST-ZIF CITY-ST-ZIP DELETE Change Addition 51 BB.E TITLE 52 NAME MITROVIC, MICHAEL NAME 5.3 STREET ADDRESS **70 PINE STREET** STREET ADDRESS **NEW YORK NY** 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 6.1 TITLE Γ∃ Change ☐ Addition TITLE GREENBERG, M.R. 6.2 NAME NAME

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

70 PINE STREET

NEW YORK NY



CR2E034 (11/98)