

# 2001 UNIFORM BUSINESS REPORT (UBR)

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0594040

DOCUMENT # F95000000844

1. Entity Name

AIG TECHNICAL SERVICES, INC.

FILED

01 MAY -1 PM 12:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

70 PINE STREET  
NEW YORK NY 10270

Mailing Address

70 PINE STREET  
ATTN E M TUCK  
NEW YORK NY 10270  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 13-3772426

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET, STE 105  
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CD ☐ Delete  
NAME SANDLER, ROBERT M  
STREET ADDRESS 70 PINE STREET  
CITY-ST-ZIP NEW YORK NY

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE EVP ☐ Delete  
NAME SWEENEY, JAMES M  
STREET ADDRESS 70 PINE STREET  
CITY-ST-ZIP NEW YORK NY 10270

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME MCFATE, CAROL A  
STREET ADDRESS 70 PINE STREET  
CITY-ST-ZIP NEW YORK NY 10270

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME TUCK, ELIZABETH M  
STREET ADDRESS 70 PINE STREET  
CITY-ST-ZIP NEW YORK NY

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE V ☐ Delete  
NAME AUSTIN, TERRI D  
STREET ADDRESS 70 PINE STREET  
CITY-ST-ZIP NEW YORK NY 10270

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME GREENBERG, M.R.  
STREET ADDRESS 70 PINE STREET  
CITY-ST-ZIP NEW YORK NY

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Elizabeth M. Tuck*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(212) 770-7000

Daytime Phone #

CR2E034 (10/00)

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THE UNITED STATES  
CORPORATION  
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 134356 4320171

AUTHORIZATION :

COST LIMIT : \$ 150.

*Patricia Pizot*

ORDER DATE : May 1, 2001

ORDER TIME : 10:47 AM

ORDER NO. : 134356-065

CUSTOMER NO: 4320171

CUSTOMER: Ms. Bernadette Colon  
American International Group,  
70 Pine Street  
30th Floor  
New York, NY 10270

NOT INTENDED  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

2001 MAY -1 PM 12:15

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

ANNUAL REPORT FILING

NAME: AIG TECHNICAL SERVICES, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder - Ext. 1118

EXAMINER'S INITIALS: \_\_\_\_\_