## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9500002114  1. Entity Name AIG ENVIRONMENTAL MANAGEMENT, INC.						FILED 03 APR 29 AM 8: 15					
Principal Plac 70 PINE ST.		Mailing Address 70 PINE STREET	<del></del>			SECRETARY OF STATE TALLAHASSEE, FLORIDA					
NEW YORK NY 10270 US		ATTN E M TUCK NEW YORK NY 10270									
2. Principal P	flace of Business	US 3. Mailing Address					<b>.</b>				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					CHECK HERE IF MAK	KING CHANGES	03		
City & State		City & State				4. FEII	Number 13-3836962	<del></del>	oplied For ot Applicable		
Zip	Country	Country Zip		Country		5. Certificate of Status Desired   \$8.75 Additional Fee Required					
	6. Name and Address of Current Re	gistered Agent		Nome		7. Nam	e and Address of New Registe	red Agent			
THE PREN	ITICE-HALL CORPORATION SYSTEM	INC		Name			<u> </u>				
1201 HAY		, inc.		Street A	reet Address (P.O. Box Number is Not Acceptable)						
SUITE 105									<del></del>		
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											
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State							Election Campaign Financing     Trust Fund Contribution.		00 May Be d to Fees		
10.	OFFICERS AND DI	RECTORS	11.		r	ADDIT	IONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11		
	CD Sandler, Robert M.	☐ Delete	TITLE					Change	☐ Addition		
NAME STREET ADDRESS CITY-ST-ZIP	70 PINE ST. NEW YORK NY		NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME	T MCFATE, CAROL A	X Delete	TITLE		TBens	SM	er, sleven J.	☐ Change	Addition		
STREET ADDRESS	70 PINE STREET NEW YORK NY 10270		STRE	- Et address -st-zip	170 P	ine	Street				
TITLE	C.	□ Delete	TITLE		New	Yor	K, NY 10270	Change	Addition		
NAME	KUNZMANN, BRUCE	Belong	NAME								
STREET ADDRESS CITY-ST-ZIP	400 INTERPACE PARKWAY PERSIPPANY NJ			et address • St-Zip			80001734	9308	į		
TITLE	S	☐ Delete	TITLE					☐ Change	Addition		
NAME	TUCK, ELIZABETH M		NAME					_ •			
	70 PINE STREET NEW YORK NY 10270			ET ADDRESS ST-ZIP							
TITLE	V	☐ Delete	TITLE				<del></del>	☐ Change	☐ Addition		
	AUSTIN, TERRI D		NAME								
STREET ADDRESS CITY-ST-ZIP	70 PINE STREET NEW YORK NY 10270			ET ADDRESS -St-Zip					Ì		
TITLE	P	☐ Delete	TITLE					☐ Change	Addition		
NAME	CAREY, JOHN	-	NAME						J		
	70 PINE STREET NEW YORK NY 10270			T ADDRESS ST-ZIP							
	ertify that the information supplied with the	s filing does not qualify to			ed in Sec	rtion 119	07(3)(i) Florida Statutes I further	Certify that the i	nformation		

12. 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 eath; 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4/22/03 (2/2)770-7000

CR2E034 (10/



ACCOUNT NO. : 07210000032

REFERENCE : 073352

4320171

AUTHORIZATION

COST LIMIT : \$ 150.00

ORDER DATE: April 29, 2003

ORDER TIME: 11:20 AM

ORDER NO. : 073352-035

CUSTOMER NO: 4320171

CUSTOMER: Ms. Nancy Wong

American International Group, 30th Floor, 70 Pine Street

- Corporate

New York, NY 10270

## ANNUAL REPORT FILING

NAME: AIG ENVIRONMENTAL MANAGEMENT, INC.

XX ANNUAL REPORT										
PLEASE	RETURN	THE	FOLLOWING	AS	PROOF	OF	FILING:			
XX	_ CERTII _ PLAIN _ CERTII	STAN	STA	ANDING						

CONTACT PERSON: Sara Lea-EXT#1114

EXAMINER'S INITIALS: