2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05604

Entity Name: AIG MARKETING, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
3 BEAVER VALLEY RD WILMINGTON, DE 19803							
Current Mailing Address:				New Mailing Address:			
70 PINE STREET 30TH FLOOR NEW YORK, NY 10270			3 BEAVER VALLEY ROAD WILMINGTON, DE 19803				
FEI Number: 51-0283170 FEI Number Applied For () FEI Num			nber Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent: Nam					ame and Address of New Registered Agent:		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US							
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:							
	Electronic	Signature of Registered Agent	t			Date	
Election Campaign Financing Trust Fund Contribution ().							
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CEOP () DESANTIS, ANTH 3 BEAVER VALLI WILMINGTON, D	EY RD		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	EVPT () E PFEIL, GLENN A 3 BEAVER VALLI WILMINGTON, D	EY RD		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	DCOO () E LOUCKS, WILLIA 3 BEAVER VALLI WILMINGTON, D	EY RD		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SVP () [ALEJNIKOV, KAF 3 BEAVER VALLI WILMINGTON, D	REN M EY RD		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	SVPD () CAIN, ESTA L 3 BEAVER VALLI WILMINGTON, D			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	S ()E TUCK, ELIZABET 3 BEAVER VALLI WILMINGTON, D	EY RD		Title: Name: Address: City-St-Zip:	S CAIN, ESTA 3 BEAVER V WILMINGTO		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ESTA LEE CAIN S 04/28/2009