

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 830984

(1)

1. Corporation Name

THE TOKIO MARINE AND FIRE INSURANCE COMPANY, LIM
ITED

Principal Place of Business

101 PARK AVENUE
NEW YORK NY 10178-0095
US

Mailing Address

101 PARK AVENUE
NEW YORK NY 10178-0095
US

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 30 AM 11:57

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 10/04/1973	3a. Date of Last Report 02/16/1994
4. FBI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
FLORIDA STATE INSURANCE COMM THE CAPITOL BUILDING TALLAHASSEE FL 32301	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	83
	84 City
	FL 85 Zip Code

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	☐ Change ☐ Addition
NAME	OKUBO, SHINGO	1.2 NAME	
STREET ADDRESS	101 PARK AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK, NEW YORK 00000	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	☐ Change ☐ Addition
NAME	NARIMATSU, HIROSHI	2.2 NAME	
STREET ADDRESS	101 PARK AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK, NEW YORK 00000	2.4 CITY-ST-ZIP	
TITLE	VD	3.1 TITLE	☐ Change ☐ Addition
NAME	SEKI, TAKATOSHI	3.2 NAME	
STREET ADDRESS	101 PARK AVENUE	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK, NY 00000	3.4 CITY-ST-ZIP	
TITLE	P	4.1 TITLE	☒ Change ☐ Addition
NAME	YOSHIKOSHI, SHINYA	4.2 NAME	Masaharu Nakamura
STREET ADDRESS	101 PARK AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK, NY 00000	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	☐ Change ☐ Addition
NAME	JOHNSTON, GLENN M	5.2 NAME	
STREET ADDRESS	800 E COLORADO BLVD	5.3 STREET ADDRESS	
CITY-ST-ZIP	PASADENA CA	5.4 CITY-ST-ZIP	
TITLE	DV	6.1 TITLE	☐ Change ☐ Addition
NAME	HIROYOSHI, WADA	6.2 NAME	
STREET ADDRESS	800 E COLORADO BLVD	6.3 STREET ADDRESS	
CITY-ST-ZIP	PASADENA CA	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Hiroshi Narimatsu*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Hiroshi Narimatsu

January 23, 1995 (212) 297-6963

Date

Telephone Number