

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000042944

FILED
Apr 02, 2020
Secretary of State
9833204842CC

Entity Name: MAPFRE ASSISTANCE USA INC.

Current Principal Place of Business:

7300 CORPORATE CENTER DRIVE, SUITE 601
MIAMI, FL 33126

Current Mailing Address:

7300 CORPORATE CENTER DRIVE, SUITE 601
MIAMI, FL 33126

FEI Number: 46-0547293

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AROLA KAMINSKI, DAVID
LEGAL DEPT.
7300 CORPORATE CENTER DRIVE, SUITE 601
MIAMI, FL 33126 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: DAVID AROLA KAMINSKI

04/02/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	ASST. SECRETARY	Title	TREASURER, HEAD OF FINANCE
Name	AROLA KAMINSKI, DAVID	Name	BREEDEN, BRIAN
Address	7300 CORPORATE CENTER DRIVE, SUITE 601	Address	7300 CORPORATE CENTER DR., SUITE 601
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126
Title	VP	Title	CHAIRMAN
Name	MONTENEGRO, BARBARA	Name	CASTELO, ALFREDO
Address	7300 CORPORATE CENTER DR., SUITE 601	Address	7300 CORPORATE CENTER DR., SUITE 601
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126
Title	DIRECTOR	Title	DIRECTOR
Name	ALVES, NELSON	Name	FACON, FRANCOIS
Address	7300 CORPORATE CENTER DR., SUITE 601	Address	7300 CORPORATE CENTER DR., SUITE 601
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126
Title	PRESIDENT, CEO, REGIONAL GENERAL MANAGER, DIRECTOR	Title	VP, TAX
Name	MARRUGO ROJAS, JAIR GIOVANNI	Name	DOWELL, DAMON
Address	7300 CORPORATE CENTER DRIVE, SUITE 601	Address	7300 CORPORATE CENTER DRIVE, SUITE 601
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126

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I hereby 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 all other like empowered.

SIGNATURE: DAVID AROLA KAMINSKI

ASSISTANT SECRETARY

04/02/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP, OPERATIONS
Name MUNIZAGA, ERNESTO
Address 7300 CORPORATE CENTER DRIVE, SUITE 601
City-State-Zip: MIAMI FL 33126

Title DIRECTOR
Name JIMENEZ, LEIRE
Address 7300 CORPORATE CENTER DRIVE, SUITE 601
City-State-Zip: MIAMI FL 33126

Title SECRETARY
Name SHER, MICHAEL
Address 7300 CORPORATE CENTER DRIVE,
SUITE 601
City-State-Zip: MIAMI FL 33126