2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2016
Secretary of State
CC7157009287

DOCUMENT# 852219

Entity Name: TRANS PACIFIC INSURANCE COMPANY

Current Principal Place of Business:

230 PARK AVENUE
NEW YORK, NY 10169

Current Mailing Address:

230 PARK AVENUE
C/O LEGAL DEPT
NEW YORK, NY 10169

FEI Number: 13-3118700

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000 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 — Date

Officer/Director Detail :

Title	PRESIDENT, DIRECTOR
Name	UMEDA, KOKI
Address	230 PARK AVENUE
City-State-Zip:	NEW YORK NY 10169

Title	DIRECTOR
Name	STERN, LAWRENCE
Address	230 PARK AVENUE
City-State-Zip:	NEW YORK NY 10169

Title	DIRECTOR
Name	KITTAKA, TOMOYA
Address	230 PARK AVENUE
City-State-Zip:	NEW YORK NY 10169

Title	TREASURER
Name	KELLY, MICHAEL
Address	C/O TMNA SERVICES, LLC 3 BALA PLAZA EAST SUITE 400
City-State-Zip:	BALA CYNWYD PA 19004

Title	DIRECTOR
Name	GOLDSTEIN, B. STEVEN
Address	230 PARK AVENUE
City-State-Zip:	NEW YORK NY 10169

Title	SECRETARY
Name	SAYAGO, EDWARD
Address	230 PARK AVE
City-State-Zip:	NEW YORK NY 10169

Title	DIRECTOR
Name	GINN, ANN
Address	230 PARK AVENUE
City-State-Zip:	NEW YORK NY 10169

Title	DIRECTOR
Name	GOTTSCHALL, DAVID
Address	230 PARK AVENUE
City-State-Zip:	NEW YORK NY 10169

Continues on page 2

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: EDWARD SAYAGO SECRETARY 04/12/2016

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LAPIERRE, ADAM
Address	800 E. COLORADO BLVD.
City-State-Zip:	PASADENA CA 91101

Title	CFO
Name	GILMER-PAUCIELLO, KAREN
Address	THREE BALA PLAZA EAST C/O TMNA SERVICES, LLC SUITE 400
City-State-Zip:	BALA CYNWYD PA 19004