

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002360

Entity Name: UNIVERSAL INSURANCE COMPANY

Current Principal Place of Business:

101 PARAMOUNT DRIVE., STE #220
SARASOTA, FL 34232

Current Mailing Address:

101 PARAMOUNT DRIVE., STE #220
SARASOTA, FL 34232 US

FEI Number: 66-0313825

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER-SERVICE OF PROCESS SECTION
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: CHIEF FINANCIAL OFFICER

01/05/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MIRANDA-MERLE, MONIQUE
Address 101 PARAMOUNT DRIVE., STE #220
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR
Name VEGA, JOSELY J
Address 101 PARAMOUNT DRIVE., STE #220
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR
Name PEREZ, LUIS
Address 101 PARAMOUNT DRIVE., STE #220
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR
Name AMADEO-LOPEZ, JORGE J.
Address 101 PARAMOUNT DRIVE., STE #220
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR
Name AMADEO-PEREZ, JORGE
Address 101 PARAMOUNT DRIVE., STE #220
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR
Name FABERY, WALDEMAR
Address 101 PARAMOUNT DRIVE., STE #220
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR
Name MEDINA, JOSE
Address 101 PARAMOUNT DRIVE
SUITE 220
City-State-Zip: SARASOTA FL 34232

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: JOSELY J. VEGA

DIRECTOR

01/05/2022

Electronic Signature of Signing Officer/Director Detail

Date