### **2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F9400006680

Entity Name: TRANSATLANTIC GROUP-DELAWARE INC.

Jun 25, 2020 Secretary of State 1618308905CC

**FILED** 

## **Current Principal Place of Business:**

17895 COLLINS AVE.

SUNNY ISLES BEACH, FL 33160

## **Current Mailing Address:**

17895 COLLINS AVE.

SUNNY ISLES BEACH, FL 33160 US

FEI Number: 65-0445090 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

THE PRENTICE HALL CORPORATION SYSTEM, INC. 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

Date

#### Officer/Director Detail:

Title	DEVP	Title	AVP

Name HIRSCH, MARK S Name TORPEY, CARITE L
Address 17895 COLLINS AVE. Address 17895 COLLINS AVE.

City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160

Title EVP, MANAGING DIRECTOR Title SVP, CFO

Name ROBERTSON, JOHNATHAN Name SHMUELI, OREN

Address 17895 COLLINS AVE. Address 17895 COLLINS AVE.

City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160

TitleTREASURERTitleCONTROLLERNameGARCIA, ANDRESNameWEINFELD, GARYAddress17895 COLLINS AVE.Address17895 COLLINS AVE.

City-State-Zip: SUNNY ISLES BEACH FL 33160 City-State-Zip: SUNNY ISLES BEACH FL 33160

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: CARITE L. TORPEY

Electronic Signature of Signing Officer/Director Detail

**AVP** 

06/25/2020 Date