## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000005591

Entity Name: POPULAR INSURANCE AGENCY USA, INC

FILED Mar 31, 2011 Secretary of State

= naisy name: 1 of object (integration for the following state)	, 1100.
Current Principal Place of Business:	New Principal Place of Business:
9600 W. BRYN MAWR AVE. ROSEMONT, IL 60018	
Current Mailing Address:	New Mailing Address:
9600 W. BRYN MAWR AVE. ROSEMONT, IL 60018	
FEI Number: 36-4473714 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US	
The above named entity submits this statement for the p in the State of Florida.	ourpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Age	ent Date
OFFICERS AND DIRECTORS:	
Title: D	

 Name:
 DORAN, BRIAN F

 Address:
 120 BROADWAY

 City-St-Zip:
 NEW YORK, NY 10271

Title:

Name: JUNQUERA, JORGE A
Address: 9600 W. BRYN MAWR AVE.
City-St-Zip: ROSEMONT, IL 60018

Title: SVP

 Name:
 PETERS, DAVID F

 Address:
 9600 W. BRYN MAWR AVE.

 City-St-Zip:
 ROSEMONT, IL 60018

Title: CEOD

Name: CHINEA, MANUEL A
Address: 9600 W. BRYN MAWR AVE.
City-St-Zip: ROSEMONT, IL 60018

Title: VF

Name: MANTONI, BERNARD J Address: 120 BROADWAY City-St-Zip: NEW YORK, NY 10271

Title: COBD

 Name:
 CARRION, RICHARD L

 Address:
 9600 W. BRYN MAWR AVE.

 City-St-Zip:
 ROSEMONT, IL 60018

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: BERNARD J MANTONI VP 03/31/2011