2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2012
Secretary of State

DOCUMENT# F01000005591

Entity Name: POPULAR INSURANCE AGENCY USA, INC.

Current Principal Place of Business:

9600 W. BRYN MAWR AVE.
ROSEMONT, IL 60018

New Principal Place of Business:

Current Mailing Address:

9600 W. BRYN MAWR AVE.
ROSEMONT, IL 60018

New Mailing Address:

FEI Number: 36-4473714 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: DORAN, BRIAN F
Address: 120 BROADWAY
City-St-Zip: NEW YORK, NY 10271

Title: D
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: VP
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 04/23/2012

Electronic Signature of Signing Officer or Director — Date