

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005189

FILED
Jan 20, 2009
Secretary of State

Entity Name: ZURICH LATIN AMERICA CORPORATION

Current Principal Place of Business:

1221 BRICKELL AVE, STE 1400
MIAMI, FL 33131

New Principal Place of Business:

1221 BRICKELL AVE.
SUITE 1400
MIAMI, FL 33131

Current Mailing Address:

1221 BRICKELL AVE, STE 1400
MIAMI, FL 33131

New Mailing Address:

1221 BRICKELL AVE.
SUITE 1400
MIAMI, FL 33131

FEI Number: 26-0530367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: PAREDES, JAIME
Address: 1221 BRICKELL AVE, STE 1400
City-St-Zip: MIAMI, FL 33131

Title: DS () Delete
Name: CASHIN, JOHN R.
Address: ALFRED ESCHERSTRASSE 50
City-St-Zip: 8022 ZURICH SWITZERLAND,

Title: D () Delete
Name: CRON, CHRISTOPHER J.
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

Title: V () Delete
Name: REBRIN, PETER
Address: 1221 BRICKELL AVE, STE 1400
City-St-Zip: MIAMI, FL 33131

Title: AS () Delete
Name: NAGEL, JON
Address: 165 BROADWAY, 1 LIBERTY PLAZA, 33 FL
City-St-Zip: NEW YORK, NY 100061404

Title: AS () Delete
Name: HAUSER, RICHARD J.
Address: 1400 AMERICAN LANE
City-St-Zip: SCHAUMBURG, IL 60196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAIME PAREDES

P

01/20/2009

Electronic Signature of Signing Officer or Director

_____ Date