

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 10, 1999 8:00 am  
Secretary of State

05-10-1999 90246 032 \*\*\*150.00

DOCUMENT # K14482

1. Corporation Name

MAPFRE INSURANCE COMPANY OF AMERICA, INC.

Principal Place of Business

3401 NW 82 AVE  
SUITE 100  
MIAMI FL 33122

Mailing Address

3401 NW 82 AVE  
SUITE 100  
MIAMI FL 33122

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/09/1990

4. FEI Number

58-1878046

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☒

No

9. Name and Address of Current Registered Agent

INSURANCE COMMISSIONER  
THE CAPITOL BUILDING  
TALLAHASSEE FL

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D  
TERRASSA, JUAN A.  
STREET ADDRESS ESQUINA CESAR GONZALEZ, EDI #7  
CITY-ST-ZIP HATO REY PR

TITLE ☐ DELETE

NAME DEVS  
FREYRE, PEDRO A  
STREET ADDRESS 8541 SW 72 TERR  
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME D  
PALOP, JUAN  
STREET ADDRESS AVDA DIAGONAL 579-PL 10  
CITY-ST-ZIP BARCELONA SP

TITLE ☐ DELETE

NAME DVT  
FREYRE, ERNESTO JR  
STREET ADDRESS 8840 SW 97TH TERR  
CITY-ST-ZIP MIAMI FL

TITLE ☒ DELETE

NAME V  
FERNANDEZ, HUMBERTO  
STREET ADDRESS 3130 PEACHTREE CIR  
CITY-ST-ZIP DAVIE FL 33328

TITLE ☐ DELETE

NAME DP  
FERNANDEZ, SILVA JORGE  
STREET ADDRESS 8041 SW 54TH CT  
CITY-ST-ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

NAME V  
SHAW, PETER W.  
STREET ADDRESS 327 LAKE CREST CT  
CITY-ST-ZIP FT LAUDERDALE FL 33326

2.1 TITLE ☐ Change ☒ Addition

NAME D  
DE VEGA, PRIMITIVO  
STREET ADDRESS CLAUDIO COELLO, 123  
CITY-ST-ZIP 28006 MADRID, SPAIN

3.1 TITLE ☐ Change ☒ Addition

NAME V  
NAON, ALBERTO  
STREET ADDRESS 12471 SW 21 LANE  
CITY-ST-ZIP MIAMI FL 33175

4.1 TITLE ☒ Change ☐ Addition

NAME  
STREET ADDRESS 9040 SW 78 CT  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

NAME V  
YAU, MICHAEL W.  
STREET ADDRESS 7200 SW 131 ST  
CITY-ST-ZIP MIAMI FL 33156

6.1 TITLE ☐ Change ☒ Addition

NAME D  
GASTON DE ZARRAGA SR.  
STREET ADDRESS 8202 LOS PINOS CIR  
CITY-ST-ZIP CORAL GABLES, FL 33143

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/22/99 305 477-5552

CR2E034 (11/98)

0178177

MAPFRE INSURANCE COMPANY OF AMERICA, INC. -2-

(CONT'D)

538114-90246-32

#K14482

AV

DIANE M. DEPPEN

13940 SW 91 TERR

MIAMI FL 33186