

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P35843 (2)  
1. Corporation Name  
UNITED STATES P. & I. AGENCY INC.

97 SEP 19 AM 9:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
180 MAIDEN LANE  
TAX DIVISION, 11TH FLOOR  
NEW YORK NY 10038

Mailing Address  
180 MAIDEN LANE  
TAX DIVISION, 11TH FLOOR  
NEW YORK NY 10038

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 CNA Plaza

Suite, Apt. #, etc.

22 City & State  
23 Chicago, IL

Zip

24 60685

Country

25 US

2a. Mailing Address

26 CNA Plaza

Suite, Apt. #, etc.

27 Statutory Reporting-21S

28 City & State  
Chicago, IL

Zip

29 60685

Country

30 US

3. Date Incorporated or Qualified

10/09/1991

3a. Date of Last Report

07/12/1996

4. FEI Number

13-2646082

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME DONNEY, TIM E.  
STREET ADDRESS 41 STATION ROAD  
CITY-ST-ZIP CRANBURY NJ

TITLE V  
NAME MCLAUGHLIN, JOSEPH M.  
STREET ADDRESS 89-10 85TH STREET  
CITY-ST-ZIP WOODHAVEN NY

TITLE S  
NAME HABER, MARTIN D.  
STREET ADDRESS 2 EAST END AVENUE  
CITY-ST-ZIP NEW YORK NY

TITLE T  
NAME ENGLERT, JURGEN W.  
STREET ADDRESS 881 MT. EYRE ROAD  
CITY-ST-ZIP NEWTOWN PA

TITLE CD  
NAME PRENDERGAST, THOMAS J.  
STREET ADDRESS 4 BRIARWOOD COURT  
CITY-ST-ZIP PRINCETN JUNCTION NJ

TITLE D  
NAME WILDISH, RODERIC J.  
STREET ADDRESS 11 EDGEWOOD ROAD  
CITY-ST-ZIP YARDLEY PA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
100002301501--8  
-09/23/97--01098--009  
\*\*\*\*165.00 \*\*\*\*165.00

2.1 TITLE C & D  
2.2 NAME Thomas H. Rowley  
2.3 STREET ADDRESS CNA Plaza  
2.4 CITY-ST-ZIP Chicago, IL 60685

3.1 TITLE GV & D  
3.2 NAME Marvin Cashion  
3.3 STREET ADDRESS CNA Plaza  
3.4 CITY-ST-ZIP Chicago, IL 60685

4.1 TITLE AV  
4.2 NAME Cathy J. Pierce  
4.3 STREET ADDRESS CNA Plaza  
4.4 CITY-ST-ZIP Chicago, IL 60685

5.1 TITLE S  
5.2 NAME Mary A. Ribikawskis  
5.3 STREET ADDRESS CNA Plaza  
5.4 CITY-ST-ZIP Chicago, IL 60685

6.1 TITLE AS  
6.2 NAME Robert J. Grob  
6.3 STREET ADDRESS CNA Plaza  
6.4 CITY-ST-ZIP Chicago, IL 60685

14. I do 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.

SIGNATURE:

Cathy J. Pierce

9/17/97

312-822-4255

CR2E034 (4/97)