2025 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000088871

Entity Name: UNIVERSAL LIFE INSURANCE (FL) COMPANY

FILED
Jan 08, 2025
Secretary of State
3758569287CC

Current Principal Place of Business:

804 SOUTH DOUGLAS ROAD SUITE 365 CORAL GABLES, FL 33134

Current Mailing Address:

PO BOX 71338

SAN JUAN, PUERTO RICO 00936-8438 PR

FEI Number: 66-0502334 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAW OFFICE OF CARLOS A. ROMERO, JR., P.A. 804 SOUTH DOUGLAS ROAD SUITE 365 CORAL GABLES, FL 33134 US

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

Officer/Director Detail:

DIRECTOR Title Title DIRECTOR AMADEO-LOPEZ, JORGE J PEREZ, LUIS Name Name PO BOX 71338 PO BOX 71338 Address Address City-State-Zip: City-State-Zip: SAN JUAN 00919 SAN JUAN 00919

Title DIRECTOR Title DIRECTOR AND SECRETARY

Name FABERY, WALDEMAR Name VEGA, JOSELY Address PO BOX 71338 Address PO BOX 71338

City-State-Zip: SAN JUAN OC 00919 City-State-Zip: SAN JUAN OC 00919

Title DIRECTOR Title TREASURER

Name MEDINA, JOSE Name JIMENEZ, MARITERE

Address PO BOX 71338 Address PO BOX 71338

City-State-Zip: SAN JUAN OC 00919 City-State-Zip: SAN JUAN OC 00919

TitleDIRECTORTitleDIRECTORNameMIRANDA-MERLE, MONIQUENameTORO, JAIME

Address PO BOX 71338 Address PO BOX 71338

City-State-Zip: SAN JUAN OC 00919 City-State-Zip: SAN JUAN OC 00919

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: JOSELY VEGA DIRECTOR 01/08/2025