## 2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 811112** 

Entity Name: TIME INSURANCE COMPANY II

**Current Principal Place of Business:** 

250 AVENIDA LUIS MUNOZ RIVERA

SUITE 420

SAN JUAN, 00918

**Current Mailing Address:** 

P.O.BOX 194320

SAN JUAN, PR 00919 PR

FEI Number: 39-0658730 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLASSEE, FL 32301 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: CAMILLE SILVA 03/17/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title DIRECTOR, CEO Title DIRECTOR, PRESIDENT
Name HOLMES, ACHIM MAXIMILIAN Name FELDMAN, JONATHAN

Address P.O.BOX 194320 Address P.O.BOX 194320

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

Title CFO

Name STARRS, KATHLEEN NORA

Address P.O.BOX 194320 City-State-Zip: SAN JUAN PR 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: KATHLEEN N. STARRS

CHIEF FINANCIAL OFFICER

03/17/2020

FILED Mar 17, 2020

**Secretary of State** 

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