

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 811112

Entity Name: TIME INSURANCE COMPANY

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
TALLAHASSEE, 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

05/28/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, CEO

Title CFO

Name HOLMES, ACHIM MAXIMILIAN

Name STARRS, KATHLEEN NORA

Address P.O.BOX 194320

Address P.O.BOX 194320

City-State-Zip: SAN JUAN PR 00919

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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

05/28/2021

Electronic Signature of Signing Officer/Director Detail

Date