## 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20208

Entity Name: AXA ART INSURANCE CORPORATION

**Current Principal Place of Business:** 

3 WEST 35TH STREET, 11TH FLOOR

NEW YORK, NY 10001

**Current Mailing Address:** 

3 WEST 35TH STREET, 11TH FLOOR NEW YORK, NY 10001 US

FEI Number: 13-3368745 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES STREET TALLAHASSEE, FL 32399-0000 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

FILED Mar 02, 2016

**Secretary of State** 

CC7315754943

Officer/Director Detail:

Title P Title 5

Name FISCHER, CHRISTIANE Name KERR, GARY
Address 04-74 48TH AVE. APT. 21 AB Address 1291 G STREET

City-State-Zip: LONG ISLAND CITY NY 11109 City-State-Zip: VALLEY STREAM NY 11580

Title T Title CEO

Name RIEFENHAUSER, ERNEST A Name FISCHER, CHRISTIANE

Address 7 GRACE LANE Address 04-74 48TH AVENUE, APT 21A/B City-State-Zip: CORTLANDT MANOR NY 10567 City-State-Zip: LONG ISLAND CITY NY 11109

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: GARY A. KERR

CORPORATE SECRETARY 03/02/2016