



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State - Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2016**

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <b>849126</b>		2. Exact name of the Corporation <b>AE Underwriters Agency, Inc.</b>			
3. Principal office address <b>444 Madison Avenue, Suite 501</b>		City <b>New York</b>		State <b>NY</b>	Zip <b>10022</b>
4. Business Phone No. <b>800-222-3058</b>		5. State of Incorporation <b>New York</b>			
6. Brief description of the character of business conducted in Rhode Island <b>Insurance Agency</b>					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name <b>Nachum Stein</b>			Vice-President Name <b>Vivalde Couto</b>		
Street Address <b>444 Madison Avenue, Suite 501</b>			Street Address <b>444 Madison Avenue, Suite 501</b>		
City <b>New York</b>	State <b>NY</b>	Zip <b>10022</b>	City <b>New York</b>	State <b>NY</b>	Zip <b>10022</b>
Secretary Name <b>Shaindy Dembitzer</b>			Treasurer Name <b>Steve Klein</b>		
Street Address <b>444 Madison Avenue, Suite 501</b>			Street Address <b>444 Madison Avenue, Suite 501</b>		
City <b>New York</b>	State <b>NY</b>	Zip <b>10022</b>	City <b>New York</b>	State <b>NY</b>	Zip <b>10022</b>
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>Nachum Stein</b>			Director Name <b>Steve Klein</b>		
Street Address <b>444 Madison Avenue, Suite 501</b>			Street Address <b>444 Madison Avenue, Suite 501</b>		
City <b>New York</b>	State <b>NY</b>	Zip <b>10022</b>	City <b>New York</b>	State <b>NY</b>	Zip <b>10022</b>
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of Instruction sheet.			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			200	Common	.01

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

**FILED**

**JAN 25 2016**

Form No. 630  
Revised: 01/2012

3V **HL 1266**

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

*Joseph F. Morris* 01/20/2016  
Signature of Authorized Representative Date  
**Joseph F. Morris**  
Print or Type Name of Authorized Representative

## Profit Corporation Annual Report for the Year 2016

Entity Name: AE Underwriters Agency, Inc.

Entity ID No. 849126

### **OFFICERS cont.**

#### Vice President

Joseph F. Morris

2250 Chapel Avenue West, Suite 200

Cherry Hill, NJ 08002

#### Chief Financial Officer

David Weiner

2250 Chapel Avenue West, Suite 200

Cherry Hill, NJ 08002