

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 832320

**Entity Name:** UBS FINANCIAL SERVICES INSURANCE AGENCY INC.

**Current Principal Place of Business:**

1200 HARBOR BOULEVARD  
UBS FINANCIAL SERVICES INC.  
WEEHAWKEN, NJ 07086

**Current Mailing Address:**

1200 HARBOR BOULEVARD  
UBS FINANCIAL SERVICES INC.  
WEEHAWKEN, NJ 07086 US

**FEI Number:** 51-0120742

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 :**

Title           TREASURER  
Name           ESKANDARIAN, ARA  
Address        1200 HARBOR BOULEVARD  
                  UBS FINANCIAL SERVICES INC.  
City-State-Zip: WEEHAWKEN NJ 07086

Title           SECRETARY  
Name           GRASSMANN, CHERYL A  
Address        1200 HARBOR BOULEVARD  
                  UBS FINANCIAL SERVICES INC.  
City-State-Zip: WEEHAWKEN NJ 07086

Title           DIRECTOR, PRESIDENT  
Name           PELLEGRINO, PHILIP  
Address        1200 HARBOR BOULEVARD  
                  UBS FINANCIAL SERVICES INC.  
City-State-Zip: WEEHAWKEN NJ 07086

*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:** CHERYL A. GRASSMANN

**SECRETARY**

**03/19/2023**

Electronic Signature of Signing Officer/Director Detail

Date