COMMONWEALTH OF PUERTO RICO
OFFICE OF THE COMMISSIONER INSURANCE

March 1, 2004

CIRCULAR LETTER NUMBER: C-ES-3-1705-2004

TO ALL GENERAL AGENTS AND MANAGERS

RE: GENERAL AGENTS AND MANAGERS REPORT FOR 2004

Dear Sirs and Madams:

Section 1 of Rule 15 of the Regulations of the Puerto Rico Insurance Code, as amended, provides the following:

> "On or before March 31 of every year, all general agents or managers shall file with the Commissioner on the forms provided by the Commissioner an annual report on the insurance business transacted during the calendar year ending on the preceding December 31st. If no business was transacted, it shall be so stated on the form." (Our emphasis).

Under the provisions of this section, the annual report including the information for the calendar year ending on December 31, 2003, shall be filed with this Office no later than **March 31, 2004,** by any general agent or manager who held an appointment as such for any period of time during that calendar year.

Any general agent or manager who has represented more than 7 insurers during the 2003 calendar year shall file the enclosed forms with the Office of the Commissioner of Insurance in hard copy and electronic format. To comply with the electronic filing the forms to be used are those provided on our website **www.ocs.gobierno.pr/forms.** Upon opening the document, you will complete the required information and send it by email to: lkianes@ocs.gobierno.pr and jperez@ocs.gobierno.pr.

If the general agent or manager does not have Internet access, the agent or manager may contact us to provide the electronic file in Excel or the agent or manager may visit our Office, located at Cobian's Plaza, Lower Mall, Ave. Ponce de León #1607, Santurce, Puerto Rico.

General agents or managers that have represented 7 insurers or less during calendar year 2003, shall file the required reports with this Office in hard copy.

If there is any question about this request, please contact our Office at (787) 722-8686, extension 2249 or 2214.

We require the use of the enclosed forms. Any report filed on a form that is not enclosed herein will be deemed not to have been filed.

Strict compliance with the provisions of this Circular Letter is hereby required.

Very truly yours,

SIGNED

Dorelisse Juarbe-Jiménez
Commissioner of Insurance

Enclosures

COMMONWEALTH OF PUERTO RICO
OFFICE OF THE COMMISSIONER INSURANCE

ANNUAL REPORT ON THE BUSINESS OF GENERAL AGENTS AND MANAGERS FOR THE CALENDAR YEAR ENDING ON DECEMBER 31, 2003.

1. Name of the General Agent ( ) _____

   Manager ( ) _____

2. Social Security Number: _____

3. License Number: _____

4. Mailing Address: _____

   _____

   Street Address:_____

   _____

   Email:_____ Telephone No.: _____Fax:_____

5. If this is a corporation, state below the names of the shareholders and the percentage (%) of shares owned by each on the date of this report.

Name of Shareholders	**% of Shares**

If the corporation in turn has shareholders that are corporations, enclose an organizational chart showing the ultimate holding company, subsidiaries, and affiliates.

6. If this is a corporation, state the names of the directors:

7. Number of agents and brokers that placed insurance business through you during the period covered in this report_____

8. Volume of premium written during the period of this report_____.

9. For the period of this report, indicate in Table 1 the premium written, commissions earned, and contingent commissions for each insurer represented, as well as commissions paid to agents or brokers who placed business through you.[1]

[1]If additional space is required, attach another sheet

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Table 1: *Summary by Insurer Represented of Business Transacted by the General Agent or Manager During the 2003 Calendar Year*

Name of the Represented Insurer	Premium Written	Commissions Earned[2]	Contingent Commissions[3]	Commissions Paid
Total				

[2] Includes all regular commissions received as an agent and general agent, including those paid to other agents.

[3] Includes all contingent commissions received as an agent and general agent, including those paid to other agents.

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Table 2: *Detail of Premium Written and Commissions Earned for Calendar Years 2003 and 2002*

2003	Miscellaneous Insurance			Life Insurance			Variable Annuities	Total 2003
	Auto	Other	Total	Credit Insurance	Other	Total		
Premium Written								
Commissions Earned[4]								

2002	Miscellaneous Insurance			Life Insurance			Variable Annuities	Total 2002
	Auto	Other	Total	Credit Insurance	Other	Total		
Premium Written								
Commissions Earned[4]								

[4]Includes all regular and contingent commissions received as an agent and general agent, including those paid to other agents.

10. State the name of agents or brokers whom you paid more than $25,000 in commissions for the period of this report (1):

- _____
- _____
- _____
- _____
- _____

11. State the name of the deposit institution and number(s) of account(s) used by the agent or broker to deposit premium funds.

Deposit Institution	**Account Number**

I CERTIFY: That this is a complete statement of all of the insurance business transacted by me during the aforementioned calendar year, as shown by the direct, extensive, and detailed investigation I have made of the books and documents in my power. I acknowledge that misrepresentation of any material fact in this statement is a violation of the Puerto Rico Insurance Code and I assume responsibility for the accuracy of this statement and certification.

In_____, Puerto Rico, this _____day of_____, _____.

_____

Signature of the general agent or manager (if a natural person) or of the president of the general agent or manager (if a corporation or partnership)

_____

Name of the person signing the report

_____

Date