

INSTRUCTIONS	STATUS
Provide the required information in the following tabs:	
<p>a. Profile</p> <ul style="list-style-type: none"> Company Name - select using the dropdown function Expiry Date - provide expiry date of each license Company Address Company Head - President/Chief Executive Officer/Equivalent Officer Finance Head - can be the Chief Financial Officer, Finance Manager, or the authorized representative of the Company who will sign the PDF copy of Profile tab in Form C External Auditor Information - select using the dropdown function Number of Officers and Employees Certification Section - attests that the Finance Head/Equivalent Officer has prepared all the information provided and all the documents submitted are true and accurate. Sign-off should be made in the PDF copy of the Profile tab 	<p>Completed Completed Completed Completed Completed Completed Completed</p>
<p>b. Prudential Requirements</p> <p>I. Net Worth Requirement</p> <ul style="list-style-type: none"> If the Company does not currently hold an HMO Broker License, answer the additional questions. If the Company has net worth deficiency, provide explanation, after-date transactions, or planned actions to address the deficiency. <p>II. Fiduciary Ratio Requirement</p> <ul style="list-style-type: none"> Indicate the Transaction Type using the dropdown function. If the Company is under Direct Remittance Agreement, answer additional questions. Provide amounts required for the Fiduciary Ratio computation. Provide the necessary reconciliation and explanation, if applicable. 	<p>Completed Not applicable Completed Completed Not applicable Not applicable</p>
<p>c. Bonds and Policies</p> <ul style="list-style-type: none"> Indicate the issuer, coverage period, and the coverage amount of surety bond/s and errors & omissions policies. 	<p>Completed</p>
<p>d. Statement of Business Operations (Insurance broker) - summary of the Company's premium and commission production related to insurance and HMO business</p>	<p>Completed</p>
<p>e. Statement of Business Operations (Reinsurance broker) - summary of the Company's premium and commission production related to reinsurance and HMO business</p>	<p>Not applicable</p>
<p>f. Statement of Business Operations (Reconciliation) - presents the differences between the balances in SBO and Audited Trial Balance templates</p>	<p>Completed</p>
<p>g. Audited Financial Statement</p> <ul style="list-style-type: none"> Indicate Financial Statement values required. 	<p>Completed</p>
<p>h. Audited Trial Balance (Statement of Financial Position) - summary of real accounts per CL No. 2021-69.</p>	<p>Completed</p>
<p>i. Audited Trial Balance (Statement of Comprehensive Income) - summary of nominal accounts per CL No. 2021-69.</p>	<p>Completed</p>
<p>j. Compliance and Governance - provides supplemental information on the Company's business structure (i.e., broker's license, significant changes in the Company's production, and information on the parent company, if any)</p>	<p>Completed</p>

COMPANY PROFILE

Company Name	107 Exchange Insurance Broker, Inc.	107E
Broker Type	Insurance Broker - Existing	
License Number	IB-04-2024-R-A	
Expiry Date	31-Dec-25	
Company Address	7th Floor Exchange Corner Building	

Company President/CEO/Equivalent Officer

Name	Jose Luis U. Yulo, JR.
Email Address	insurphil1964@gmail.com
Contact Number	9178940090

Finance Head/Equivalent Officer

Name	Kristina Angela T. Nakayama
Email Address	kathelmo@gmail.com
Contact Number	88152850

External Auditor

Name of External Auditor	Mendoza-Cruz, Michelle R.
Latest IC Accreditation No.	IC EA-2025-0037-N
Group	Group A
Name of Audit Firm	Reyes Tacandong & Co.
Email Address	mrmendoza@reyestacandong.com
Contact Number	(632)89829188

	IB	RB	HMOB
Number of Officers	Two (2)	N/A	N/A
Number of Employees	Two (2)	N/A	N/A

I hereby attest that I prepared all the information provided and all the documents submitted are true and accurate to the best of my knowledge. Any errors found by the Commission will be subject to penalty in accordance with IC Circular Letter No. 2014-15 Fees and Charges. I also understand that I am bound to provide additional documents that are deemed necessary by the Brokers and Insurance Pools Division for the verification of our Company's financial condition.


 Kristina Angela T. Nakayama
 (Corp. Secretary/Acting Compliance Officer)

Insurance Commission's Data Privacy Disclosure

The information provided will be treated with utmost respect and confidentiality. The Insurance Commission follows general principles and rules of Data Privacy protection in the Philippines.

PRUDENTIAL FINANCIAL REQUIREMENTS

I. Net Worth Requirement

Broker Type

Insurance Broker - Existing

Additional Questions for Brokers without HMO Broker License:

- 1. Does the Company have an ongoing application for an HMO broker license?
- 2. Does the Company earn commission from brokering HMO business?

No
No

Net Worth per Statement of Financial Position
Net Worth Requirement per CL Nos. 2018-52 and 2023-02
Excess/(Deficiency)

123,869,530.00
10,000,000.00
113,869,530.00

should tally with AFS balance

II. Fiduciary Ratio Requirement

A. Transaction Type

Direct Remittance Agreement

should tally with AFS disclosure

Additional Question:

As of year-end, does the Company have any outstanding premiums collected from clients that are scheduled for remittance to insurance, reinsurance, or HMO company/ies in the following period?

No

B. Fiduciary Ratio Computation

Fiduciary Ratio is not required

Client's Money*
Other Fiduciary Assets*
Fiduciary Liabilities*
Fiduciary Ratio**

-
-
-
-

should tally with AFS disclosure

**Amounts should be gross of the commissions, allowances for impairment, taxes, fees, and other charges.*

***Computed by dividing the sum of Client's Money and Other Fiduciary Assets by Fiduciary Liabilities*

SURETY BOND/S AND ERRORS AND OMISSIONS POLICIES

Notes and Instructions:

Details should match with the supporting documents (Form B - Item no. 5)

Surety Bond/s

Issuer	Coverage Period (dd/mmm/yy)		Amount of Coverage
	Effectivity Date	Expiry Date	
Sterling Insurance Company, Inc.	15-May-26	15-May-27	1,000,000.00
Total Amount of Coverage			1,000,000.00

Errors and Omissions Policies

Issuer	Coverage Period (dd/mmm/yy)		Amount of Coverage
	Effectivity Date	Expiry Date	
MAA General Assurance Phils., Inc.	06-Sep-25	06-Sep-26	500,000.00
Sterling Insurance Company, Inc.	12-Aug-25	12-Aug-26	500,000.00
Total Amount of Coverage			1,000,000.00

107 Exchange Insurance Broker, Inc.
Reconciliation of Premium Accounts per SBO vs. AFS
as of December 31, 2025

Notes and Instructions:

Add rows on the *Reconciling items* section, if necessary.

	<i>Policyholder</i>	<i>Ceding Company</i>	<i>HMO</i>	<i>Total</i>	<i>Justification</i>
Premiums Receivable, end (per SBO)	-	-	-	-	
Add/Less Reconciling items:					
[description]	-			-	N/A
[description]				-	N/A
[description]				-	N/A
Balance, AFS	-	-	-	-	
	<i>Insurance Company</i>	<i>Reinsurer</i>	<i>HMO</i>	<i>Total</i>	
Premiums Payable, end (per SBO)	-	-	-	-	
Add/Less Reconciling items:					
[description]				-	N/A
[description]				-	N/A
[description]				-	N/A
Balance, AFS	-	-	-	-	
Commissions Receivable, end (per SBO)	-				
Add/Less Reconciling items:					
[description]					N/A
[description]					N/A
[description]					N/A
Balance, AFS	-				
Commissions Revenue, (per SBO)	387,810.00				
Reconciling items:					
[description]					N/A
[description]					N/A
[description]					N/A
Balance, AFS	387,810.00				

AUDITED FINANCIAL STATEMENT BALANCES**I. Statement of Financial Position****ASSETS**

Total Current Assets
Total Noncurrent Assets
Total Assets

CURRENT YEAR	PRIOR YEAR
60,952,502.00	29,476,768.00
80,634,137.00	99,220,177.00
141,586,639.00	128,696,945.00

LIABILITIES AND EQUITY

Total Current Liabilities
Total Non-current Liabilities
Total Liabilities

Total Equity

8,594,629.00	8,003,124.00
9,122,480.00	6,608,698.00
17,717,109.00	14,611,822.00
123,869,530.00	114,085,123.00

II. Statement of Comprehensive Income

Total Revenues
Total Expenses
Income Tax
Net Income
Other Comprehensive Income(Loss)
Total Comprehensive Income

CURRENT YEAR	PRIOR YEAR
23,548,504.00	24,123,673.00
12,642,202.00	15,460,131.00
2,292,053.00	1,720,812.00
8,614,249.00	6,942,730.00
1,170,158.00	1,072,395.00
9,784,407.00	8,015,125.00

107 Exchange Insurance Broker, Inc.
Insurance Broker - Existing
Statement of Financial Position
as of December 31, 2025

Notes and Instructions: Balances should tally with AFS.

ASSETS		LIABILITIES AND SHAREHOLDERS' EQUITY	
	CURRENT	NON-CURRENT	
1 Cash Restricted - Client's Money Account			23 Payable to Insurance Companies
1.1 Client's Money on Hand	-		24 Payable to Reinsurer
1.2 Client's Money in Bank	-		25 Payable to Ceding Company
2 Cash and Cash Equivalents			26 Payable to Insured
2.1 Cash on Hand	5,000.00		27 Payable to HMO
2.2 Cash in Bank	26,945,829.00		28 Other Payables
2.3 Cash Equivalents	4,334,400.00		28.1 Accounts Payable
2.4 E-Money	-		28.2 Operating Lease Liability
2.5 Allowance for Expected Credit Losses	-		28.3 Dividends Payable
3 Receivable from Insurance Companies' Clients	-		28.4 SSS/ECC/PAGIBIG/Philhealth Contributions Payable
4 Receivable from Ceding Company	-		28.5 Taxes Payable - Others
5 Receivable from HMO Members	-		28.6 Management Fee Payable
6 Commission Receivable	-		28.7 Notes Payable
7 Other Receivables			28.8 Loan Payable
7.1 Accounts Receivable	14,107,761.00		28.9 Finance Lease Liabilities
7.2 Notes Receivable	-		28.10 Post-Employment Benefits Obligation
7.3 Loans Receivable	-		28.11 Deferred Tax Liability
7.4 Interest Receivable	-		28.12 Derivative Liabilities Held for Hedging
7.5 Dividend Receivable	-		28.13 Deferred Income
7.6 Subscription Receivable	-		28.14 Other Liabilities
7.7 Receivable - Others	-		TOTAL LIABILITIES
8 Allowance for Expected Credit Losses - Receivables	-		
9 Prepayments			29 Issued Share Capital
9.1 Prepaid Rent	-		29.1 Preferred Shares
9.2 Rental Deposit	-		29.2 Common Shares
9.3 Prepaid VAT	-		30 Subscribed Share Capital
9.4 Creditable Withholding Tax	-		31 Additional Paid-In Capital
9.5 Prepayments - Others	-		32 Retained Earnings
10 Financial Asset at Fair Value Through Profit or Loss	-		Retained Earnings, beginning
11 Financial Assets at Amortized Cost	22,522,496.00		Net Income/(Loss)
12 Financial Asset at Other Comprehensive Income	8,159,103.00		Dividends
13 Derivative Assets Held for Hedging	-		Other Adjustments/Appropriations
14 Investment in Subsidiaries	-		33 Treasury Shares
15 Investment in Associates	-		34 Reserves
16 Investment in Joint Ventures	-		35 Contingency Surplus
17 Investment Property			36 Revaluation Surplus
17.1 Investment Property - Land	-		37 Others
17.2 Investment Property - Building and Building Improvements	61,689,060.00		TOTAL SHAREHOLDERS' EQUITY
17.3 Investment Property - Foreclosed Properties	1,133,253.00		
17.4 Investment Property - Right-of-Use Asset	-		TOTAL LIABILITIES AND SHAREHOLDERS' EQUITY
18 Property, Plant, and Equipment			
18.1 Land	-		
18.2 Building and Building Improvements	-		
18.3 Leasehold Improvements	-		
18.4 I.T. Equipment	-		
18.5 Transportation Equipment	-		
18.6 Office Furniture, Fixtures and Equipment	-		
18.7 Right-of-Use Asset (PPE)	-		
18.8 Other Equipment	-		
18.9 Revaluation Increment	-		
18.10 Accumulated Depreciation	-		
18.11 Accumulated Impairment Losses	-		
19 Post-Employment Defined Benefit Assets			
20 Deferred Tax Assets	-	2,642,981.00	
21 Intangible Assets	-	-	
22 Other Assets	46,756.00	-	
TOTAL ASSETS		141,586,639.00	

107 Exchange Insurance Broker, Inc.
Insurance Broker - Existing
Statement of Comprehensive Income
For the Year Ended December 31, 2025

Notes and Instructions: Balances should tally with AFS.

	CURRENT YEAR	PRIOR YEAR
38 Commission Income	387,810.00	350,142.00
39 Service Fee Income	-	-
40 Interest Income	2,340,688.00	1,752,381.00
41 Dividend Income	12,295.00	262,469.00
42 Rental Income	20,198,198.00	21,750,834.00
43 Gain/(Loss) on Sale of Investments	609,513.00	-
44 Gain/(Loss) on Sale of Property and Equipment	-	-
45 Miscellaneous Income	-	7,847.00
Total Revenues	23,548,504.00	24,123,673.00
46 Cost of Services/Direct Expenses		
46.1 Representation and Entertainment	117,785.00	-
46.2 Transportation and Travel Expense	-	-
46.3 Management Fee Expense	-	-
46.4 Salaries and Wages Benefits (Direct)	2,078,893.00	3,928,518.00
46.5 Commission Expense	-	-
46.6 Other Direct Expenses	332,486.00	400,892.00
47 Administrative Expense		
47.1 Salaries and Wages Benefits (Indirect)	664,495.00	553,741.00
47.2 Professional and Technical Development	-	-
47.3 Professional Fees	175,720.00	218,316.00
47.4 Taxes and Licenses	522,927.00	567,159.00
47.5 Rental Expense	1,419,355.00	1,635,454.00
47.6 Utilities Expense	194,559.00	539,436.00
47.7 Depreciation and Amortization	3,389,764.00	3,368,656.00
47.8 Repairs and Maintenance	84,050.00	274,897.00
47.9 Insurance Expense	187,719.00	209,609.00
47.10 Advertising/Promotions	-	-
47.11 Bank Charges	-	-
48 Donation and Contribution	-	-
49 Miscellaneous Expense	-	-
50 Doubtful Accounts Expense	-	-
51 Impairment Loss	-	-
52 Other Indirect Expenses	3,474,449.00	3,763,453.00
53 Provision for Income Tax		
53.1 Provision for Income Tax - Final	-	-
53.2 Provision for Income Tax - Current	2,591,708.00	1,720,812.00
53.3 Provision for Income Tax - Deferred	(299,655.00)	-
Total Expenses	14,934,255.00	17,180,943.00
Net Income/(Loss)	8,614,249.00	6,942,730.00
Other Comprehensive Income/(Loss)	1,170,158.00	1,072,395.00
Total Comprehensive Income/(Loss)	9,784,407.00	8,015,125.00

107 Exchange Insurance Broker, Inc.
Insurance Broker - Existing
Compliance and Governance Information

Broker's License
 Has the company filed the following changes, if any, to the Commission?

- a. Licensing changes
- b. Company directors
- c. Company officers
- d. Company location
- e. Intermediary appointments
- f. Insurance products

Has the company had a new or large amount of complaints?

Has the company corresponded or filed for anything not covered in the items above?

Significant Changes

Document any (a) unusual events or economic changes, (b) known trends or uncertainties, and (c) material increases in premium.

Top 5 Business Lines	Current Year	Prior Year	Increase/Decrease	
MCAR	1,028,275.88	788,074.97	30%	0.30
FIRE	894,698.04	738,006.12	21%	0.21
PERSONAL ACCIDENT	294,983.45	387,442.40	-24%	-0.24
CGL	3,741.00	-	0%	-
CARI	1,371.00	1,912.00	-28%	-0.28

Document any material changes in business lines in the last three (3) years.

Document liquidity and its sources, trends, known demands, or uncertainties that will materially change the Company's liquidity

Document transactions, relationship, and arrangement with others that are reasonably likely to have a material effect on the liquidity or capital requirements, and detailed information on off-balance sheet arrangements, if any

Holding Company

Is the Company a member of a conglomerate?

If Yes, fill out the following (Note: Disregard this section if not applicable):
 Name of Ultimate Parent/ Holding Company Group Name

Organization type:

(Select 1) Stock Non-stock
 (Select 1) Public-traded Non-public
 (Select 1) Insurer Non-insurer

Holding Company Operations (select 1)

Exclusively insurance and ancillary functions
 Primarily insurance and ancillary functions
 Substantially non-insurance operations

Document differences in the prior year and current year's organizational structure

NONE

Has the company filed external audited financial statements of its ultimate parent or controlling affiliate for the year being reviewed?

Date filed:

Yes No

Company reliance on holding company for needed capital, operational support through pooling agreements, administrative and/or investment service agreements, etc.

NONE

Does the Company have other investments in parent or affiliates, such as notes, bonds, mortgages, and surplus notes?

Yes No

Provide the following information:

	Y1	Y2	Y3
Net Income	8,614,249.00	6,942,730.00	- 55,402,954.00
Non-controlling Interest	926,031.76	746,343.47	- 5,961,358.00
Net cash flows	28,943,301.00	- 480,586.00	- 1,717,474.00

Yes	No	If Yes, Put Remarks
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Deletion of Cristina Tomas due to resignation
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Deletion of Madonna Da Silva & Cesar Thelmo
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Deletion of Madonna Thelmo, Cesar Thelmo, Yolanda D
<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	

NONE

Justification
 Strong demand for vehicles in the local market which required CTPL
 Greater insurance awareness and improved marketing and distribution efforts

NONE

The company source of Funds are mainly from rentals from its office condominiums. Costs and administrative expenses are relatively low due to less number of Officers and employees, small consumption of utilities and other

Increase of Net Income due to no impairment loss recognized for year 2025. The company still remains compliant with the minimum capital requirement of the Insurance Commission.