

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000040462

Entity Name: TOSCANO INSURANCE GROUP CORP

Current Principal Place of Business:

1111 LINCOLN RD SUITE 500
MIAMI BEACH, FL 33139

Current Mailing Address:

PO BOX 414033
MIAMI BEACH, FL 33141 US

FEI Number: 46-5606857

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOSCANO, JULIAN ANDRES
7545 E. TREASURE DRIVE, UNIT 10A
NORTH BAY VILLAGE, FL 33141 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: JULIAN ANDRES TOSCANO

02/02/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name TOSCANO, JULIAN ANDRES
Address 7545 E. TREASURE DRIVE, UNIT 10A
City-State-Zip: NORTH MIAMI FL 33141

Title D
Name TOSCANO, JULIAN ANDRES
Address 7545 E. TREASURE DRIVE, UNIT 10A
City-State-Zip: NORTH MIAMI FL 33141

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: JULIAN ANDRES TOSCANO

AGENCY PRESIDENT

02/02/2024

Electronic Signature of Signing Officer/Director Detail

Date