## 2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000040462

**Entity Name: TOSCANO INSURANCE GROUP CORP** 

**Current Principal Place of Business:** 

7601 E TREASURE DR., SUITE CU-1 MIAMI BEACH. FL 33141

**Current Mailing Address:** 

7601 E TREASURE DR., SUITE CU-1 MIAMI BEACH, FL 33141 US

FEI Number: 46-5606857 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOSCANO, JULIAN ANDRES 7601 E TREASURE DR., SUITE CU-1 MIAMI BEACH, 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 02/08/2018

Electronic Signature of Registered Agent

Date

FILED Feb 08, 2018

**Secretary of State** 

CC8395247989

Officer/Director Detail:

Title P Title I

NameTOSCANO, JULIAN ANDRESNameTOSCANO, JULIAN ANDRESAddress7601 E TREASURE DR., SUITE CU-1Address1881 79TH ST CSWY 1604

City-State-Zip: MIAMI BEACH FL 33141 City-State-Zip: NORTH BAY VILLAGE 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.