


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90095 001 ***900.00

DOCUMENT # P00000070065 1. Entity Name TOISCA CORP.					
Principal Place of Business 7451 NW 63RD ST MIAMI, FL 33166			Mailing Address 7451 NW 63RD ST MIAMI, FL 33166		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO MCNABB, TERENCE 200 FRIBERG PARKWAY STE 4000 WESTBOROUGH, MA 01581 <div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/CEO/D TERRENCE MCNABB 200 FRIBERG PARKWAY, STE 4000 WESTBOROUGH, MA 01581 <div style="text-align: right;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS PARLENGAS, RONALD 18 RED GAP RD WILBRAHAM, MA 01095 <div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/COO MARK SAN FRATELLO 200 FRIBERG PARKWAY, STE 4000 WESTBOROUGH, MA 01581 <div style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BALDUCCI, JOSEPH 51 LONGWOOD DR BOSTON, MA 02110 <div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/CFO TERRY BELLORA 200 FRIBERG PARKWAY, Suite 4000 WESTBOROUGH, MA 01581 <div style="text-align: right;"><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KWAIT, BRIAN 75 ROCK MAPLE ROAD GREENWICH, CT 06830 <div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HITCHNER, DOUGLAS 56B FOREST DRIVE SPRINGFIELD, NJ 07081 <div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE: <i>Ronald Parlengas</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> </div> <div style="width: 20%;"> RONALD PARLENGAS </div> <div style="width: 20%;"> 4/25/2006 <small>Date</small> </div> <div style="width: 20%;"> 508-594-2562 <small>Daytime Phone #</small> </div> </div>					

66010549



04072006 Chg-P CR2E034 (11/05)

4. FEI Number
65-1029711

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**