

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000127400

Entity Name: TOSCA ROOFING, INC.

FILED  
Jul 25, 2006  
Secretary of State

## Current Principal Place of Business:

6607 PLOVER CT.  
SEFFNER, FL 33584

## New Principal Place of Business:

1606 N KINGSWAY ROAD  
SEFFNER, FL 33584

## Current Mailing Address:

6607 PLOVER CT.  
SEFFNER, FL 33584

## New Mailing Address:

6607 PLOVER COURT  
SEFFNER, FL 33584

FEI Number: 20-4339311

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LASMAN, JEFFREY M. ESQ.  
6152 DELANCEY STATION ST., STE. 205  
RIVERVIEW, FL 33569 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: TOSCA, ENRIQUE  
Address: 6607 PLOVER CT.  
City-St-Zip: SEFFNER, FL 33584

Title: DV ( ) Delete  
Name: TOSCA, DANIEL  
Address: 6607 PLOVER CT.  
City-St-Zip: SEFFNER, FL 33584

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: TOSCA, ENRIQUE  
Address: 6607 PLOVER COURT  
City-St-Zip: SEFFNER, FL 33584

Title: DV (X) Change ( ) Addition  
Name: TOSCA, DANIEL S  
Address: 6607 PLOVER COURT  
City-St-Zip: SEFFNER, FL 33584

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ENRIQUE TOSCA

DPS

07/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date