

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000129422

Entity Name: TOESIES, INC.

FILED
Jan 03, 2006
Secretary of State

Current Principal Place of Business:

750 S. OCEAN BOULEVARD
12-N
BOCA RATON, FL 33432 US

New Principal Place of Business:

310 EAST ATLANTIC AVENUE
DELRAY BEACH, FL 33483 US

Current Mailing Address:

750 S. OCEAN BOULEVARD
12-N
BOCA RATON, FL 33432 US

New Mailing Address:

310 EAST ATLANTIC AVENUE
DELRAY BEACH, FL 33483 US

FEI Number: 20-3508758

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAW, BETH A
CHAPIN, BALLERANO & CHESLACK
1201 GEORGE BUSH BOULEVARD
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

CHESLACK, BRIAN G
CHAPIN, BALLERANO & CHESLACK
1201 GEORGE BUSH BOULEVARD
DELRAY BEACH, FL 33483 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: BRIAN G CHESLACK

01/03/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: PETERSEN, PATTI
Address: 750 S. OCEAN BOULEVARD, 12-N
City-St-Zip: BOCA RATON, FL 33432 US

Title: DIR (X) Delete
Name: SHAW, BETH A
Address: 750 S. OCEAN BOULEVARD, 12-N
City-St-Zip: BOCA RATON, FL 33432 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PETERSEN, PATTI
Address: 750 S. OCEAN BOULEVARD, 12-N
City-St-Zip: BOCA RATON, FL 33432 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PATTI PETERSEN

PD

01/03/2006

Electronic Signature of Signing Officer or Director

Date