2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State
01-13-2003 90103 002 ***150.00

DOCUMENT # L25171

1. Entity Name
ASSURA - SHAUN CORP.

Principal Place of Business	Mailing Address
CRYSTAL LKE CHEVRON 390 W. SAMPLE RD POMPANO BEACH FL 33064 US	6795 NW 43RD PLACE CORAL SPRINGS FL 33067 US

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

X CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0150138 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ROBERT, RAMAN 6795 N.W. 43RD PL. CORAL SPRINGS FL 33064	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	P ROBERT, RAMAN 6795 N.W. 43RD PL. CORAL SPRINGS FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Assura K. Robert 6795 NW 43rd Pl Coral Springs Fl. 33067. ☐ Change X Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS ROBERT, AKLIMA 6795 N.W. 43RD PL. CORAL SPRINGS FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROBERT, SHAUN 6795 N.W. 43RD PL. CORAL SPRINGS FL 33067	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KUMAR, SANDHYA 6795 N.W. 43RD PL. CORAL SPRINGS FL 33067	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KUMAR, PRIYA 6795 N.W. 43RD PL. CORAL SPRINGS FL 33067	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KUMAR, ANANDA 6795 N.W. 43RD PL. CORAL SPRINGS FL 33067	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: Roberto RE Raman Robert 1-8-03 9547850810
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

80001449

Attachment
#L25171

Assura-Shaun Corp.
390 W. Sample Road
Pompano Beach, FL 33064
#0047275

Please note addition!
3rd year!!
RR