

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000118936

FILED
Jun 20, 2007
Secretary of State

Entity Name: ASSURANCE FINANCIAL GROUP, INC.

Current Principal Place of Business:

1927 NW 9TH AVE
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

1927 NW 9TH AVE
FT. LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 04-3586840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DURAND, SHAWN
1584 NE 32ND STREET
OAKLAND PARK, FL 33334 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: PSTD () Delete
Name: DURAND, SHAWN P
Address: 1584 NE 32ND STREET
City-St-Zip: OAKLAND PARK, FL 33334 US

Title: V (X) Delete
Name: DURAND, BRIAN P
Address: 3212 SKYCROFT
City-St-Zip: ST. ANTHONY VILLAGE, MN 55418 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: SHAWN P DURAND

PRES

06/20/2007

Electronic Signature of Signing Officer or Director

Date