2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000066889

City-St-Zip: PALMETTO BAY, FL 33157

Entity Name: ASSURANZ GROUP, INC.

FILED May 01, 2009 Secretary of State

Current F	Principal Place	e of Business:	New Principal Place	New Principal Place of Business:	
16760 SW PALMETT	/ 86 CT TO BAY, FL 33	157			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
16760 SW 86 CT PALMETTO BAY, FL 33157			PO BOX 560951 MIAMI, FL 33256		
FEI Number	r: 26-2982139	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address of	ame and Address of New Registered Agent:	
VINCES, (16760 SW PALMETT		:157 US			
	e named entity te of Florida.	submits this statement for the	e purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	IRE:				
	Electro	nic Signature of Registered A	gent	Date	
		93(2)(b), F.S., the corporation did g Trust Fund Contribution ().	not receive the prior notice.		
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	P (VINCES, OSC/ 16760 SW 86		Title: Name: Address:	() Change () Addition	

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: OSCAR VINCES P 05/01/2009