

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L25171

Entity Name: ASSURA - SHAUN CORP.**Current Principal Place of Business:**CRYSTAL LKE CHEVRON
390 W. SAMPLE RD
POMPANO BEACH, FL 33064**Current Mailing Address:**6795 NW 43RD PLACE
CORAL SPRINGS, FL 33067 US**FEI Number:** 65-0150138**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROBERT, RAMAN
6795 N.W. 43RD PL.
CORAL SPRINGS, FL 33064 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title VP, DIRECTOR
Name ROBERT, AKLIMA
Address 6795 N.W. 43RD PL.
City-State-Zip: CORAL SPRINGS FLTitle TREASURER
Name ROBERT, SHAUN
Address 9733 W VIEW DR
City-State-Zip: CORAL SPRINGS FL 33076Title SECRETARY
Name KUMAR, PRIYA
Address 5124 NW 66 DR
City-State-Zip: CORAL SPRINGS FL 33067Title PRESIDENT
Name ROBERT, RAMAN
Address 6795 NW 43RD PLACE
City-State-Zip: CORAL SPRINGS FL 33067

I hereby 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 all other like empowered.

SIGNATURE: RAMAN ROBERT

PRES

01/04/2016

Electronic Signature of Signing Officer/Director Detail_____
Date