

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000050946

Entity Name: ASURECARE CORP.

Current Principal Place of Business:

5151 SAN FELIPE ST
SUITE 500
HOUSTON, TX 77056

Current Mailing Address:

5151 SAN FELIPE ST
SUITE 500
HOUSTON, TX 77056

FEI Number: 58-2397026

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST.
TALLAHASSEE, FL 32399 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 PRES
Name TOPPE, ARDEE D
Address 5151 SAN FELIPE ST., STE 500
City-State-Zip: HOUSTON TX 77056

Title TREA
Name TOPPE, ARDEE D
Address 5151 SAN FELIPE ST., STE. 500
City-State-Zip: HOUSTON TX 77056

Title SEC
Name TOPPE, ARDEE D
Address 5151 SAN FELIPE ST., STE. 500
City-State-Zip: HOUSTON TX 77056

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: ARDEE D. TOPPE

PRESIDENT

01/28/2016

Electronic Signature of Signing Officer/Director Detail

Date