2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2000 8:00 am
Secretary of State
03-10-2000 90036 049 ***158.75

DOCUMENT # F98000003867

1. Entity Name

OASIS FLIGHT CONTROL SERVICES, INC.

Principal Place of Business	Mailing Address
9300 N.W. 36TH STREET MIAMI FL 33178	9300 N.W. 36TH STREET MIAMI FL 33025-3940

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3891 Commerce Parkway	1221 Brickell Avenue
Suite, Apt. #, etc.	Suite 1780
City & State: Miramar, Florida	City & State: Miami, Florida
Zip: 33025-3940 Country: USA	Zip: 33131-3259 Country: USA

4. FEI Number: 65-0844938 ☐ 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
BEVANS, RONALD T JR 9300 N.W. 36TH STREET MIAMI FL 33178	Name: Bevans, Ronald T. Jr. Street Address (P.O. Box Number is Not Acceptable): 1221 Brickell Avenue Suite 1780 City: Miami, FL **FL** Zip Code: 33131-3259

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.

SIGNATURE: Ronald T. Bevans Ronald T. Bevans, Jr. 02/28/2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing *Trust Fund Contribution.* ☐ **$5.00** May Be *Added to Fees*

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD JONES, J M 9300 N.W. 36TH STREET MIAMI FL 33178	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	1221 Brickell Avuenue, Suite 1780 Miami, FL 33131-3259	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Chairman & Director John J. Sicilian 1221 Brickell Avenue, Suite 1780 Miami, FL 33131-3259	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Todd G. Cole 1221 Brickell Avenue, Suite 1780 Miami, FL 33131-3259	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. Michael Jones 02/28/00 (305) 536-0112
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #