

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001574

FILED  
Mar 16, 2011  
Secretary of State

**Entity Name:** URBAN OASIS PROJECT, INC.

**Current Principal Place of Business:**

10210 SW 103RD CT  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

10210 SW 103RD CT  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 27-3335090      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CONTRERAS, MELISSA  
10901 OLD CUTLER ROAD  
CORAL GABLES, FL 33156      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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: PEARSON, STEPHEN D  
Address: 14525 SW 92ND CT  
City-St-Zip: MIAMI, FL 33133

Title: D  
Name: FRIEDRICH, ART  
Address: 6700 SW 52ND ST  
City-St-Zip: MIAMI, FL 33155

Title: D  
Name: MOSSMAN, RONALD E  
Address: 15101 SW 89TH AVE  
City-St-Zip: MIAMI, FL 33176

Title: D  
Name: GUADAMUZ, ANTONIO  
Address: 9201 FONTAINEBLEAU BLVD #2  
City-St-Zip: MIAMI, FL 33172

Title: D  
Name: VALDEZ, YVROSE  
Address: 86 NW 108TH ST  
City-St-Zip: MIAMI SHORES, FL 33168

Title: D  
Name: CONTRERAS, MELISSA  
Address: 10210 SW 103RD CT  
City-St-Zip: MIAMI, FL 33176

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MELISSA CONTRERAS

PRES

03/16/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date