## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **S26616**

Principal Place of Business	Mailing Address
10106 SW 114TH PL.	10106 SW 114 PL
MIAMI FL 33176-2576	MIAMI FL 33176-2576
US	

## **FILED** Jan 20, 1999 8:00am **Secretary of State**

01-20-1999 90009 019 \*\*\*150.00

OASIS HOMES INC.				
Principal Place of Business	Mailing Address			1 B181) B1811 B1811 B1811 \$1811 1881
10106 SW 114TH PL.	10106 SW 114 PL			
MIAMI FL 33176-2576	MIAMI FL 33176-2576		DO NOT WRITE IN THI	S SDACE
US			3. Date Incorporated or Qualifed	IS SPACE
		•	01/18/1991	,
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		65-0247761	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22	27		3. Ooktood 5. Status 200.00	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28	Country	Trust Fund Contribution	Added to Fees
Zip Count	try Zip	30	<ol> <li>This corporation owes the current year In Personal Property Tax.</li> </ol>	ntangible No
24 25 0 Name and Add	ress of Current Registered Agent	30	10. Name and Address of New Registere	
J, Hamo dila Man		81 Name		
MASRI, OMAR K.		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
10106 SW 114 PL.		Girect Add	aloos (Fig. Box Hallison to You Hassington)	
MIAMI FL 33176-2576		83		书 5. 油的棉胶整 1
		84 City	\$ \$2 00 00 00 00 00 00 00 00 00 00 00 00 00	85 Zip Code
103 (2.5)		' '	F	L.
11. Pursuant to the provisions of Se	ections 607.0502 and 607.1508, Florida Statut the in the State of Florida, Such change was a	tes, the above-named corp authorized by the corporati	poration submits this statement for the purpose cion's board of directors. I hereby accept the app	of changing its registered ointment as registered
				- 1
agent. I am familiar with, and ac	cept the obligations of, Section 607.0505, Flo	orida Statutes.		
SIGNATURE	, -	onda Statutes.		
agent. I am familiar with, and ac SIGNATURE Signature, typed or printed nar	me of registered agent and title if applicable. (NOTE	orida Statutes.  E: Registered Agent signature require	red when reinstating) . DATE	AND DIRECTORS IN 12
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14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

DU OMAK K. MASRI