Principal Place of Business Mailing Address Jolios SW 114 PL MIAMI FL 33176-2576 Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Applied For Not	OASIS HOMES INC.	'		Jan 09, 2 Secreta	ILED 2001 8:00 an ary of State
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For Not Applied For No	0106 SW 114TH PL. IIAMI FL 33176-2576	10106 SW 1,14 PL.		01-09-2001	90028 009 ***158.75
City & State Country Country Country Country 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent Name Name Name Name Name Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code City FL Zip Code 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 Signature, typed or printed name of registered agent and trien 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) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE MASRI, OMAR 10106 S.W. 114 PL MIAMI FL CITY-ST-ZP MIAMI FL Change Addit Addit Change Change Change Addit Change Change Change C	2. Principal Place of Business	3. Mailing Address			
Not Applicate Zip	Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN	THIS SPACE
6. Name and Address of Current Registered Agent MASRI, OMAR K. 10106 SW 114* PL MIAMI FL 33176-2576 City City FL Zip Code 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 Signature, typed or printed name of registered agent and tale if applicable. (NOTE: Registered Agent signature required when reinstating) PATE 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) To FFICERS AND DIRECTORS 10. Election Campaign Financing Trust Fund Contribution. Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE MASRI, OMAR MASRI, OMAR 10106 S.W. 114 PL MIAMI FL TITLE Delete MIAMI FL Delete MIAMI FL Delete MIAMI FL Change Additional control of the state of New Registered Agent Agent Agent Additional Address of New Registered Agent Name Name Name Name Name Name MASRI, OMAR MASRI, OMAR	City & State	City & State		4. FEI Number 65-0247761	Applied For Not Applicable
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City FL Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back) 10. Election Campaign Financing Trust Fund Contribution. 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 13. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 14. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 15. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 16. Election Campaign Financing \$5.00 May Be Added to Fees In 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 16. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 17. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 18. OFFICERS AND DI	10106 SW 114 PL.		Street Addres	s (P.O. Box Number is Not Acceptable)	
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SIGNATURE Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE					ru
TITLE	Tax filing requirement and elects to do so. (See criteria on back)	After MAY 1, 2001 Make Check Payable	Fee will be \$550.00 to Department of S	Trust Fund Contribution.	Added to Fees
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