


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 29, 2004 8:00 am**  
**Secretary of State**

04-29-2004 90342 020 \*\*\*150.00

DOCUMENT # P0300022039			
1. Entity Name OASIS FAMILY SERVICES, INC.			
Principal Place of Business 1133 KEMPTON CHASE PKWY ORLANDO, FL 32837		Mailing Address 1133 KEMPTON CHASE PKWY ORLANDO, FL 32837	
2. Principal Place of Business 2226 NEWT ST Suite, Apt. #, etc.		3. Mailing Address 2226 NEWT ST Suite, Apt. #, etc.	
City & State ORLANDO FL.		City & State ORLANDO FL.	
Zip 32837	Country	Zip 32837	Country
4. FEI Number 55-0824917		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SANTOS, LUIS A 1133 KEMPTON CHASE PKWY ORLANDO, FL 32837		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2226 NEWT ST City ORLANDO FL Zip Code 32837	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____		DATE _____	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SANTOS, LUIS A 1133 KEMPTON CHASE PKWY ORLANDO, FL 32837 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 2226 NEWT ST ORLANDO FL. 32837
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DIAZ, LYDIA E 1133 KEMPTON CHASE PKWY ORLANDO, FL 32837 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 2226 NEWT ST ORLANDO FL. 32837
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Luis A. Santos</i>		PRESIDENT LUIS A. SANTOS 11-11-04 407-855-2568	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	