

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000016115

Entity Name: OASIS MEDICAL CENTER CORP

Current Principal Place of Business:

8150 SW 8 ST
#118
MIAMI, FL 33144

Current Mailing Address:

8150 SW 8 ST
#118
MIAMI, FL 33144

FEI Number: 20-8484004

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AGUILAR, FELIPE
8150 SW 8 ST
#118
MIAMI, FL 33144 US

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

Officer/Director Detail :

Title PD
Name AGUILAR, FELIPE
Address 8150 SW 8 ST #118
City-State-Zip: MIAMI FL 33144

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

SIGNATURE: FELIPE AGUILAR

PRESIDENT

01/15/2014

Electronic Signature of Signing Officer/Director Detail

Date