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Mar 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 731850 (4)

1. Corporation Name

OASIS - A CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O MIAMI MANAGEMENT
14538 S.W. 119 AVENUE
MIAMI FL 33186

14275 SW 142ND AVE.
MIAMI FL 33186



3. Date Incorporated or Qualified

02/12/1975

4. FEI Number

59-1654125

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 C/O Courtesy Prop Mgmt 26 Courtesy Prop Mgmt.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 9380 SUNSET DR B-250

27 9380 SUNSET DR B-250

City & State

City & State

23 MIAMI, FL 33173

28 MIAMI, FL 33173

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ARIAS, MARIA
SIEGRFRIED, KIPNIS, RIVERA ET AL
201 ALHAMBRA CIRCLE SUITE 1102
CORAL GABLES FL 33134

81 Name

WILLIAM MOTYCZKA, ESO

82 Street Address (P.O. Box Number is Not Acceptable)

13410 SW 128 STREET

83

MIAMI, FL. 33186

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

1/14/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE

NAME ENRIQUEZ, FERNANDO
STREET ADDRESS 4718 SW 67TH AVE B-6
CITY-ST-ZIP MIAMI FL

1.1 TITLE VP/D ☐ Change ☒ Addition

1.2 NAME FONTICIELLA, NELDA
1.3 STREET ADDRESS 4722 SW 67 AVENUE, #A-11
1.4 CITY-ST-ZIP MIAMI, FL. 33155

TITLE VPD ☐ DELETE

NAME ALVAREZ, SANDRA
STREET ADDRESS 4714 SW 67 AVE, #C-3
CITY-ST-ZIP MIAMI FL

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME ALVAREZ, SANDRA
2.3 STREET ADDRESS 4714 SW 67 AVENUE, #C-3
2.4 CITY-ST-ZIP MIAMI, FL. 33155

TITLE T ☐ DELETE

NAME GUDE, VIVIAN
STREET ADDRESS 4728 SW 67 AVE J-2
CITY-ST-ZIP MIAMI FL

3.1 TITLE D ☐ Change ☒ Addition

3.2 NAME VERA, ESPERANZA
3.3 STREET ADDRESS 4708 SW 67 AVENUE, #L-5
3.4 CITY-ST-ZIP MIAMI, FL. 33155

TITLE D ☒ DELETE

NAME ANDERSON, ANA
STREET ADDRESS 419 MINORCA AVE
CITY-ST-ZIP CORAL GABLES FL

4.1 TITLE P ☐ Change ☒ Addition

4.2 NAME BRUNO, MARY JO
4.3 STREET ADDRESS 4728 SW 67 AVENUE #J-1
4.4 CITY-ST-ZIP MIAMI, FLORIDA 33155

TITLE D ☐ DELETE

NAME ALVAREZ, TANIA R
STREET ADDRESS 4716 SW 67 AVE, #6
CITY-ST-ZIP MIAMI FL

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE SD ☐ DELETE

NAME GRUSHNYS, THOMAS
STREET ADDRESS 4732 SW 67TH AVE. K-5
CITY-ST-ZIP MIAMI FL

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

[Signature]

2/15/98

3/5/98 638-1770

CR2E037 (10/97)