

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2000 8:00 am
Secretary of State

02-05-2000 90017 032 ****70.00

DOCUMENT # 731850
 1. Entity Name
OASIS - A CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 13250 S.W. 135TH AVENUE MIAMI FL 33186	Mailing Address 13250 S.W. 135TH AVENUE MIAMI FL 33186-6489
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
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4. FEI Number **59-1654125** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**MOTYCZKA, WILLIAM ESQ
 13410 SW 128 STREET
 MIAMI FL 33186**

7. Name and Address of New Registered Agent
 Name **Barry Blaxberg, Esq.**
 Street Address (P.O. Box Number is Not Acceptable) **Ingraham Building - 25 SE 2nd Ave.
Suite 730**
 City **Miami** FL Zip Code **33131**

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 **J. BARRY BLAXBERG 1/18/00**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CHNHA, VIVIAN 4712 S.W. 67TH AVENUE, #G-9 MIAMI FL 33155 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HOERNER, JUDITH 4710 S.W. 67TH AVENUE, #H-1 MIAMI FL 33155 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BIANCHI, PETER JR. 4716 S.W. 67TH AVENUE, #D-3 MIAMI FL 33155 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VERA, ESPERANZA 4708 SW 67 AVENUE, #L-5 MIAMI FL 33155 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALVAREZ, TANIA R 4716 SW 67 AVE, #D-6 MIAMI FL 33155 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRUSHNYS, THOMAS 4732 SW 67TH AVE. K-5 MIAMI FL 33155 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Cruz, Brenda 4708 SW 67 Ave, #L-2 Miami, FL. 33155 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bailey, Jeffrey 4728 SW 67 Ave, #J-10 Miami, FL. 33155 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bianchi, Peter Jr. 4716 SW 67th Ave. #D-3 Miami, FL. 33155 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Moss, Dorothy 4730 SW 67 Ave, #I-1 Miami, Florida 33155 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add

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 617, 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: **JUDITH A. HOERNER** Date **Jan 26, 2000** Daytime Phone #