2000 UNIFORM BUSINESS REPORT (UBR)

0226157

DOCUMENT # F98000003871

1. Entity Name

OASIS RESERVATIONS SERVICES, INC.

FILED
00 APR 27 PM 3:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
9300 N.W. 36TH STREET MIAMI FL 33178	9300 N.W. 36TH STREET MIAMI FL 33144-2373

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
7757 West Flagler St		1221 Brickell Ave	
Suite, Apt. #, etc. Suite 220		Suite, Apt. #, etc. Suite 1780	
City & State Miami, FL		City & State MIami, FL	
Zip 33144	Country USA	Zip 33131	Country USA

4. FEI Number 65-0844935 — Applied For / Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BEVANS, RONALD T JR 9300 N.W. 36TH STREET MIAMI FL 33178	Name: CT Corporation Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Road City: Plantation FL Zip Code: 33324

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: Connie Bryan Connie Bryan, Special Asst. Sec. (NOTE: Registered Agent signature required when reinstating) — DATE: 4-27-00

Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

[redacted]

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PD NAME: JONES, J. M STREET ADDRESS: 9300 N.W. 36TH STREET CITY-ST-ZIP: MIAMI FL 33178	☒ Delete	TITLE: Chairman & CEO NAME: Christopher Vizas STREET ADDRESS: 1250 24th Street, NW, #725 CITY-ST-ZIP: Washington, DC 20037	☒ Change ☐ Addition
TITLE: S NAME: BEVANS, RONALD T JR STREET ADDRESS: 9300 N.W. 36TH STREET CITY-ST-ZIP: MIAMI FL 33178	☒ Delete	TITLE: COO NAME: Bijan Moaveni STREET ADDRESS: 1250 24th Street, NW, #725 CITY-ST-ZIP: Washinton, DC 20037	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE: 800003236008 NAME: -05/03/00--01054--011 STREET ADDRESS: ****158.75 ****158.75 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/99)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bijan Moaveni — Date: 4/25/00 — Daytime Phone #: 202-822-8981

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR