FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

TPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortram

Secretary of State DIVISION OF CORPORATIONS

Secretary of State 1997 K02202 DOCUMENT # (5)OASIS POOLS, INC. Principal Place of Business Mailing Address 14703 US 19 HUDSON FL 34667 HUDSON FL 34667-3352 3. Date Incorporated or Qualified 3a. Date of Last Report 11/16/1987 05/01/1996 Applied For 2. Principal Place of Business Mailing Address 4. FEI Number 59-2866697 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 23 Country Country This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 29 30 24 25 gistered Agent g. Name and Address of Current Registered Agent 10. Name and Address of New R Name PATASCHER, DAVID 2381 KNOLL DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) SPRING HILL FL 34608 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. Change Addition PVS DELETE THILE 11 TITLE PATASCHER, DAVID NAME 1.2 NAME 2381 KNOLL DRIVE 1.3 STREET ADDRESS STREEL ADDRESS SPRING HILL FL 1.4 City-ST-ZIP CITY-ST-ZIE DELETE Change Addition 2.1 TITLE TITLE PATASCHER, TAMMY 2.2 NAME 2381 KNOLL DRIVE STREET ADDRESS 2.3 STREET ADDRESS SPRING HILL FL CHTY-SI-ZIP 2.4 CITY-ST-ZIP ■ Addition DELETE Change 3 1 TITLE TITLE VALDES, ERNY JR. NAME 32 NAME 4014 VISTA VERDE DR. #1 STREET ADDRESS 3.3 STREET ADDRESS **NEW PORT RICHEY FL** CHTY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Addition 4.1 TITLE Change TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Chai . Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP DITY-ST-ZIP 2000021458**62** -04/17/97--01019--022 DELETE 61 TITLE TITLE 6.2 NAME NAM: ***165.00 6.3 STREET ADDRESS STREEL ADDRESS 6.4 CITY - ST - ZIP

14. I do 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 eath; 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

SIGNATURE:

appears in Block 12 or Block 13 if changed,

on an attachment with an address.

Daytime Phone #

Date

FILED

Apr 16 1997 8:00am