2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031340

Entity Name: FLORIDA OASIS LLC

FILED Apr 06, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5281 W. IRLO BRONSON HWY KISSIMMEE, FL 34747

Current Mailing Address: New Mailing Address:

5215 FLYING EAGLE LANE 5281 W. IRLO BRONSON HWY KISSIMMEE, FL 34746 KISSIMMEE, FL 34747

FEI Number: 20-0171762 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ANSARI, NAILA N
5215 FLYING EAGLE LANE
KISSIMMEE, FL 34746 US
ANSARI, SAIMA N
5281 W. IRLO BRONSON HWY
KISSIMMEE, FL 34747 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: SAIMA N. ANSARI 04/06/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 ANSARI, NAILA N
 Name:
 ANSARI, SAIMA N

 Address:
 5215 FLYING EAGLE LANE
 Address:
 5281 W. IRLO BRONSON HWY

 City-St-Zip:
 KISSIMMEE, FL 34746
 City-St-Zip:
 KISSIMMEE, FL 34747

Title: MGRM (X) Delete Title: () Change () Addition

 Name:
 ANSARI, SAIMA N
 Name:

 Address:
 5215 FLYING EAGLE LANE
 Address:

 City-St-Zip:
 KISSIMMEE, FL 34746
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SAIMA N. ANSARI MGRM 04/06/2006