2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2007
Secretary of State

DOCUMENT# L05000015135

Entity Name: OASIS DREXEL, LLC

Current Principal Place of Business:

% BILL SEGAL, P.A.
20801 BISCAYNE BLVD., SUITE 304
AVENTURA, FL 33181

New Principal Place of Business:

18305 BISCAYNE BLVD.
SUITE 220
AVENTURA, FL 33160

Current Mailing Address:

JOSHUA CASPI
PO BOX 190942
MIAMI BEACH, FL 33119

New Mailing Address:

18305 BISCAYNE BLVD.
SUITE 220
AVENTURA, FL 33160

FEI Number: 20-2354901 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WASSERSTROM, ELLEN
100 W. CYPRESS CREEK ROAD, SUITE 700
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: CASPI, JOSHUA
Address: % 20801 BISCAYNE BLVD., SUITE 304
City-St-Zip: AVENTURA, FL 33181

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: CASPI, JOSHUA
Address: 18305 BISCAYNE BLVD. SUITE 220
City-St-Zip: AVENTURA, FL 33160

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: JOSHUA CASPI MGR 03/14/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date