

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M35934

Entity Name: OASIS TRAVEL & TOURS, INC.

FILED
Mar 12, 2006
Secretary of State

Current Principal Place of Business:

% OLINDA PINANEZ VALDERRAMA
114 MADEIRA AVE.
CORAL GABLES, FL 331344516

Current Mailing Address:

% OLINDA PINANEZ VALDERRAMA
114 MADEIRA AVE.
CORAL GABLES, FL 331344516

New Principal Place of Business:

OLINDA PINANEZ VALDERRAMA
114 MADEIRA AVE.
CORAL GABLES, FL 331344516

New Mailing Address:

OLINDA PINANEZ VALDERRAMA
114 MADEIRA AVE.
CORAL GABLES, FL 331344516

FEI Number: 59-2726044

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALDERRAMA, OLINDA PINANEZ
114 MADEIRA AVE.
CORAL GABLES, FL 33134 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PINANEZ, OLINDA P,
Address: 114 MADEIRA AVE.
City-St-Zip: CORAL GABLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PINANEZ, OLINDA P,
Address: 114 MADEIRA AVE.
City-St-Zip: CORAL GABLES, FL 33134

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: OLINDA PINANEZ

PRES

03/12/2006

Electronic Signature of Signing Officer or Director

_____ Date